Alabama Enforces V.D. and T.B. Examinations

By REX THOMAS, Associated Press Writer

MONTGOMERY, Ala., Sept. 13. —A rich Southern planter-politician's experiment with syphilis and tuberculosis-control on his Black Belt estate has helped give Alabama one of the nation's most progressive public-health programs.

It began in 1943 when the Legislature ordered compulsory blood tests for all civilians between 14 and 50 in an effort to reduce the crippling effects of venereal disease.

This year, following the same pattern, the lawmakers enacted a statute providing for compulsory mass examinations for tuberculosis. The program will start, says State Health Officer D. G. Gill, as soon as X-ray equipment arrives.

War Renewed

The 1947 Legislature also renewed the war on syphilis. The 4-year-old blood-testing law was extended. And the marriage statutes were tightened to require examination of both parties for syphilis before a license is issued.

The year's greatest innovation in health control, however, was enactment of the law to help battle the dread "white plague."

Sponsored by the same legislator who authored the blood-testing bill four years ago, it authorizes the State Health Department to order tuberculosis examinations in any or all counties, affecting all persons between 13 and 50 years of age except members of the armed forces.

Dr. Gill says the first tests probably will be made in the mountainous country of North Alabama, one of the most heavily infected areas in the nation.

Appropriations Same

Although the program hasn't actually started, the health officer predicts other states will be watching the T.B. survey as closely as they did the syphilis-testing which Alabama pioneered. Information about the venereal-disease law has been sent to more than 15 other capitals at the request of public-health officials.

Despite the similarity of pattern, the two laws differ in one regard — persons whose syphilis reaction is positive must take treatment: those found to be suffering from T.B. will not be required to take treatment.

The appropriations to administer the two programs are the same, $75,000 a year.

Proof of the effectiveness of the venereal-disease law is shown in these figures from Health Department records:

Of the first 1,086,450 persons tested, 101,938 were found to be infected. No one is listed as syphiletic until at least two positive blood specimens have been found.

The rate of infection is considerably higher among Negroes than whites, ranging from 10 per cent in some counties to as high as 30 per cent in others.

Among white persons, the rate varied from one-half of 1 per cent to a maximum of 3 per cent.

Senator Responsible

The first state-wide count is expected to be completed late this year. After that, the Health Department can go back over and recheck.

The legislator primarily responsible for these innovations in health regulation is wealthy Senator Bruce Henderson of rural Wilcox County. He introduced the syphilis-examination bill in 1943, got it renewed this year, and sponsored the tuberculosis program. He was a coauthor, too, of the premarital blood-test act.

Henderson's interest in public-health problems arose, he recalls, out of an abnormally high absentee rate and a sharp decline in production on his plantation in South Alabama's Black Belt. Almost invariably, the explanation was sickness.

Determined to ferret out the cause of the crippling ills that plagued his 500 Negro tenants, Henderson and his brother worked out a plan of free medical attention. The Hendersons paid the doctor bills, kept records of each case.

Cost Is Slight

As the reports came in, one after another said "syphilis." When the picture was complete, veneral disease was the diagnosis in 60 to 80 per cent of the complaints. The No. 2 trouble was tuberculosis.

As the Negroes were treated,

utilities, insurance and so on.

To make that "only" possible, the Associated Home Builders of Louisville last week advanced a plan — a plan to which was attached a string of "ifs."

Houses can be built and sold for as low as $5,950, the association declared, but only:

1. If the Louisville Water Company will install water mains to new subdivisions and home developments, and not force builders to do it on a refunding basis.

Blood Bank Founder Hits AMA Member Bar

Atlanta Daily World
Atlanta, Georgia.

Drew Points Out Requirement Hinders Negroes

Tues. 6-17-47

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WASHINGTON, D. C.—(NNPA) The requirement of membership in a county medical society in order to be eligible for membership in the American Medical Association has been attacked by Dr. Charles R. Drew, founder of the nation's first blood bank and medical director of Freedmen's Hospital.

In correspondence with Dr. Morris Fishbein, editor of the AMA Journal made public last Tuesday, Dr. Drew pointed out that this requirement in the AMA bylaws makes it impossible for a colored doctor in the south to become a member of the AMA.

Dr. George F. Lull, secretary and general manager of the AMA, informed Dr. Drew under date of February 5 that the only way the matter could be brought up in the House of Delegates at the AMA Convention held in Atlantic City last week was for a delegate to introduce it.

LULL WRITES DREW

Emphasizing that membership is controlled by county and state associations, Dr. Lull wrote Dr. Drew:

"As you know the American Medical Association cannot dictate any policies to such organizations as we are organized as a federacy of constituent associations, so that even if a resolution was passed by the House of Delegates the state and local societies could still refuse to comply with it. It will have to decided at each county and state level."

In a statement accompanying his release of the correspondence, Dr. Drew declared that "the very finality" of Dr. Lull's letter made it imperative that the situation be made known, adding:

"Approximately twice as many Negro mothers die in childbirth as the mothers of the nation as a whole Approximately twice as many children die in the early hours of life. The average Negro has a life span ten years less than the average American citizens of other racial origin. Yet physicians who take care of thse patients for the most part in those areas of the country where the conditions are worst are studiously eliminated from those associations and contacts which would make tents of physicianship. tients better". Tues. 6-17-47

The position of the AMA, we feel is not comparable with the highest tents of physicianship.

HOWARD MEN BARRED

Dr. Drew raised the question of a change in eligibiity requirements in a letter to Fishbein under date of January 13, last, in which he pointed out that at the twenty-first annual session held in Washington in 1870 the AMA voted 115 to 90 to bar men from the Department of Medicine of Howard University and Freedmen's Hospital from membership.

"Seventy-seven years after, this ruling still stands," Dr. Drew said. "This age-long policy of discrimination," he declared, "is one of the dark pages in the history of an organization which otherwise has many bright ones."

Pointing out that no physician has been considered for a professorship or associate professorship in the pre clinical area who does not have a doctor of philosophy in his special field and that in Freedmen's Hospital a man must have passed his specialty board to be considered for an assistant professorship, Dr. Drew called upon Dr. Fishbein to match those standards with those of the "great hospitals"

Nevertheless, Dr. Drew said, those standards "will not grant them the privilege of discussing common problems with fellow physicians in the learned councils of the American Medical Association."

Referring to the fact that the AMA at its Atlantic City convention celebrated its one hundredth anniversary, Dr. Drew commented:

"One hundred years of racial bigotry and fatuous pretense; one hundred years of gross disinterest in a large section of the American people wohe medical voice it purports to be-as regards the problem of Negroes which raised in 1870; one hundred years with no progress to report. A sorry record."

BASIS OF MERIT

21 AMA

Continuing, Dr. Drew said:

"The American Specialty Board accepts a man on the basis of merit; the American College of Surgeons has recently erased the infamous policy of discrimination and has made a man's ethical and surgical standards the sole measuring rod; the International Colleges open their doors to men of like training and interests regardless of race or nationality; but not the great American Medical Association.

"If a small minority of county or state chapters persist in wagging the whole body, and the body as a whole makes no move to direct its own destiny, then it must be considered a body without true strength and purpose or one which likes the way it is going. The American Medical Association should not start its second century with unfinished business of this kind making mockery of its continuous protestations of leadership in medicine under the great and free American way of life."

Tues. 6-17-47

Replying under date of January 22, Dr. Fishbein pointed out that colored physicians may now attain membership in the AMA, but that, under the association's by-laws, "it is necessary that membership be secured through entrance into a county medical society."

He said, "It has always been the province of every county medical society to determine its own membership. There is no other way in which membership in the American Medical Association can be secured by anyone. Many Negro physicians are now members."

WOULD BE RECEIVED

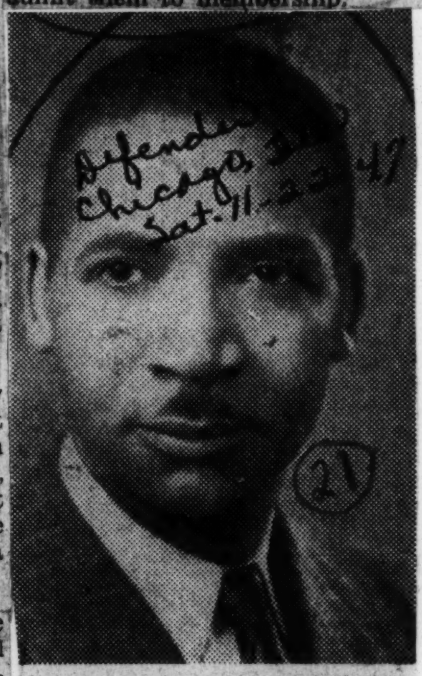
Dr. Fishbein added that "If a state medical society were to elect a Negro delegate, I am quite sure he would be received in the House of Delegates".

Replying under date of January 30, Dr. Drew told Dr. Fishbein that they both knew it is "utterly impossible for a Negro physician to become a member of a county medical society in the South." He condemned the American Medical Association for standing behind these by-laws which made this so "as though God himself had written the by-laws and that they were immutable thru the ages."

Dr Drew contended that it would be a very simple thing for the Board of Trustees of the American Medical Association to initiate changes which would grant membership to qualified men in the AMA without their having to go through county societies.

"I cannot understand why something is not done about it," Dr. Drew wrote.

Dr. Fishbein referred the correspondence to Dr. Lull, who wrote Dr. Drew that the county and state medical associations which refuse to admit colored physicians would themselves have to change their policies, thus continuing the exclusion of colored physicians who live in localities where the county and state medical association will not admit them to membership.



Defender Chicago Sat. 11-22-47

DR. K. ALBERT HARDEN, assistant professor of medicine at Howard university, Washington, who has been certified by the Board of Internal Medicine of the American Medical Association, the eighth Negro in the United States to be so honored. He is the third member of the Howard university medical school staff to be certified to this specialty board.

Chiropractic Not a Fraud, Says Research Director

Baltimore, Md. Afro-American 3D
2-15-47 Sat.

CHICAGO—Despite the charges of orthodox medical doctors, chiropractic is a "sound science," according to an article in a recent issue of the Readers Digest by C. C. Weant, research director of the Chiropractic Research Foundation. Weiant, research director of the practor successfully restores health and relieves pain for many patients because he is aware of the importance of the bony structure of the body in the diagnosis and treatment of many ailments.

Contending that disturbances in the delivery of nervous energy are the most important (though not the only) factor in causing disease, he says the bony structure is where the nervous system undergoes the greatest pressure and irritation.

Often Only Solution

By manipulating or adjusting his structure, and especially the pinal column, the chiropractor eks to remove factors interfer with the normal flow of nerve impulses. In some cases this treatfailed. 2-15-47 Sat.

Mr. Weiant also points out that the National Chiropractic Association set up high standards in 1939 for chiropractic schools and colleges, specifying for approved schools a course of not less than four years, with at least 3,600 teaching hours.

NEGROES TAKE UP STUDY OF CHIROPODY

Defender Chicago Ill. Sat.
12-27-47

Twenty four young men and women Negro students have embarked upon professional studies preparatory to their entering the field of Chiropody at the Northwestern Institute of Foot Surgery and Chiropody which is located at 960 W. Montana ave., and maintains downtown administrative offices at 185 N. Wabash. (21)

Sat. 12-27-47

Dr. O. N. Woolman, president and dean of the school, points out that the opportunities in the profession of Chiropody are better today than they have ever been before and that there is a great need for qualified persons to take training in this comparatively new and uncrowded profession. Chiropody, like Dentistry at the turn of the Century, is enjoying its period of greatest growth, Dr. Woolman explains.

Negro students now attending the Northwestern Institute of Foot Surgery and Chiropody, organized in 1927 and one of the oldest schools of its kind in the state, include the following: Freshman Class: Eugene S. Alexander, Maywood, Ill.; Louise C. Alexander, Gallipolis, Ohio; Andrew F. Curd, Mayfield, Ky.; Sophomore Class: Thornton A. Martin, Dubuque, Iowa. The following are from Chicago: Freshman Class: Lee A. Davis, Mrs. Lutye Townsend Davis, Leonard R. Elliott, Chester Gans, Samuel M. Hall, Jr., James H. Jackson, Lance R. Jones, Henry Key, Frederick J. Keys, Richard D. Lucas, William Martin, Jr., Charles Douglas Smith, John C. Wooten, Robert W. Bates; Sophomore Class: Clifton A. Long, William A. Hawkins, Willie E. Barrett; Junior Class: Miss Aramantha Watters.

Courses at the Northwestern Institute of Foot Surgery and Chiropody are open to both men and women and the school is G.I. approved. Upon graduation, the degree of Doctor of Surgical Chiropody (D.S.C.) is conferred.

According to recent surveys, more than 75% of the people (60% of the men and 90% of the women) need the attention of a Chiropodist, Dr. Woolman states. "People are realizing that many foot troubles can be lessened, often entirely eliminated by a competent Chiropodist," says Dr. Woolman.

21 1947

D. C.

Little Girl Minus Stomach Studied By Medical Experts

(21) D.C. The Advertiser Montgomery, Ala. Jan. 1-17-47

By ROBERT GEIGER

WASHINGTON, Jan. 16.—(AP)—The case of "the little girl without a stomach," Peggy Ann Elkerson, is being studied by medical experts who want to learn how she has survived eight years on a diet emphasizing beer and peanuts.

Although they don't know exactly how her food is digested, physicians at Children's Hospital saw no reason today why Peggy Ann can't live as long as other people and enjoy normal good health.

At eight she appears to be a normal, healthy child attending grade schol.

Doctors said her case is of particular interest because it is more proof a stomach isn't essential to life. Occasionally this organ has to be removed surgically.

However, the doctors thumbed through medical history and found only two other instances that compare with that of this little Washington Negro child, who was born without a stomach.

The case of a farmer's wife was described in a German paper in 1927. Another was a French case in 1755. Both were women whose deaths, in adulthood, apparently were not caused primarily by lack of stomachs, doctors said. Montgomery Ala.

Peggy Ann's esophagus (tube that normally brings food to the stomach) and the duodenum (the first part of the intestine) are connected, eliminating the stomach that should be between them. Jan 1-17-47

Under the X-ray it is possible to see that the esophagus and the duodenum imitate the work the stomach usually does, at least in part. The Advertiser

Normally digestion starts in the stomach, is completed in the intestines. Although Peggy Ann lacks all the stomach juices that start digestion, her intestines do a good job of digestion, doctors said. They added that this is an excellent example of how nature sometimes may compensate for organic physical handicaps, even major ones. (21) D.C. 1-17-47

Peggy Ann must eat more food, and take it oftener, to get the same nourishment as other people.

Her favorites are beer, peanuts and salt herirng. Her mother said the child has drunk as much as seven or eight bottles of beer in 24 hours but never becomes intoxicated. The Advertiser

Her lack of a stomach hasn't saved Peggy Ann from a "stomach ache." Of course it isn't her stomach that aches. But too much food causes her distress at the place where her stomach should be. Montgomery, Ala.

Medical Care And The Negro

DR. W. MONTAGUE COBB of the Howard University medical school has prepared, and the National Association for the Advancement of Colored People, is issuing an interesting and informative brochure on "Medical Care and the Plight of the Negro."

As was to be expected, the presentation by Dr. COBB, shows the inequalities in our American medical system which gives so much significance to the statement in the foreword of the booklet by Mr. WALTER WHITE, that "Disease germs are singularly ignorant of racial or other prejudices. They leap agilely without discrimination from one color of the skin to another and never pause to ask the manner in which their next victim worships God, or where he was born. The enormous and increasing burden on taxpayers because of ill health falls on white as well as Negro taxpayers."

Despite the continuing disparities in the medical facilities available to Negroes and whites, the average life expectancy of Negroes has shown a slight increase. However, there is a lag of about ten years behind the whites in this connection.

Although the Negro mortality rate has declined from 24.1 in 1910 to 14.0 in 1940, the latter figure was 71 percent higher than the rate of 8.2 for whites.

The diseases which usually take off the majority of Negroes are tuberculosis, maternity and infant morality, veneral diseases and other troubles growing out of ignorance, overcrowding, unbalanced diets, unhealthy sanitation, and a general inability to provide for the family the medical care that is needed.

There are approximately 4000 Negro physicians, 1600 dentists, 9000 nurses and 1400 pharmacists to 3,377 members of the race. The national average, which includes white physicians and white people, is about one to 750. But it is understood that the factors of race enter so heavily into the practice of medicine and the scarcity of physicians, both white and colored, Negroes are thrown largely upon their own physicians and hospitals. Where there is hardly enough room for whites there is very little, if any room for Negroes.

While Dr. COBB does touch on the subject, the cost of having private medical care is now prohibitive where the average Negro wage-earner is concerned.

The cost of going to a doctor's office and then to a drugstore just about takes a five-dollar bill. A poor patient suffering from any chronic disorder, such as usually takes off the majority of Negroes and poor whites, just cannot pay for this kind of medical treatment. The cost of medicines has doubled within the past two or three years. Likewise, the cost of other medical services has risen in proportion. The average working person is just not prepared to meet these costs.

The medical men are not missionaries, and the druggists are not philanthropists but the latter are merchants. The system of free enterprise obtains in the medical profession and the drug trade just as it does in other professions, vocations and businesses. The chief trouble is the scarcity of medical doctors and hospital facilities. The greatest need, perhaps, is for community clinics.

A careful reading of the presentation by Dr. COBB, which may be purchased from the NAACP for the small sum of ten cents, will convince any open-minded person that the federal and state governments must take a larger hand in public health if the nation is not to deteriorate at a more rapid rate through the undermining of the physical and mental health of the people, especially those of the minority and disadvantaged groups.

Colored Health Costs On Farms Half of Whites

WASHINGTON, D. C.—A study of changes in medical expenditures during the war reveals that Negro farm families spent only about half as much for medical care in 1945 as did white farm families in the South.

A recent preliminary release of the study, which was made by the Bureau of Human Nutrition and Home Economics and the Bureau of Agricultural Economics, shows that colored farm families had an expenditure of only $40—mainly for physicians and medical supplies—in 1945, as compared with an expenditure of $81 per white farm family in the South.

Both white and colored farm families lagged behind farm families of the North who spent $101 for medical care in 1945. The study covers medical expenditures of farm families in 25 states in the North Central and Southern regions during 1941 and 1945. During this period average medical expenditures in the South increased from $41 to $70, and in the North they increased from $64 to $101. This indicates that although the South is behind in medical expenditures, it is increasing the amount of medical care per farm family at a somewhat faster rate than the North.

DOCTORS' SERVICES

The leading item of expenditure for medical care both North and South was physicians' services. This was true in 1941 and in 1945. During the period expenditures for physicians' services increased from $25 to $46 per farm family in the North and from $14 to $30 per farm family in the South. Second highest expenditure in the North was for hospital care; in the South it was drugs and medical supplies. This seems to indicate greater prevalence of self-medication in the South than in the North.

Medical Program Given to Truman

Federal Aid for Two Schools, Race Asked

NEW YORK—America's present shortage of trained men and women in scientific fields, as recently emphasized by the U.S. Scientific Research Board, is nowhere more acute than in the area of health and medical education for colored people, President Truman was advised last week by the NAACP.

Walter White, executive secretary, called the President's attention to a recent pamphlet, "Medical Care and the Plight of the Negro," by Dr. W. Montague Cobb of Howard University, which has aroused significant interest among many scientific and educational groups.

Racism Major Factor

The major factor in the shortage is racial discrimination at all levels of education. Mr. White said:

"Failure to appreciate the far-reaching effects of this discrimination and to abolish it have deprived our country of incalculable contributions to scientific advancement and national well-being which could have been made by colored men and women in the past.

"Its continuance in this perilous period constitutes a conspiracy against the survival of America."

8-Point Program Urged

President Truman was urged to consider an eight-point program and the establishment of a National Science Foundation.

If enacted into law, the Foundation would provide fellowships for promising students as a nation-wide co-ordinating scientific educational program.

Under no circumstances would colored citizens under the Foundation be placed in a separate or jim-crow group.

Entrance to Schools

The eight points suggested by the NAACP are:

(1) The doors of existing medical schools should be opened to properly qualified colored candidates.

(2) If additional medical schools are constructed, they should be strategically located where they can serve all qualified students regardless of race, but should not be exclusively colored schools.

None should be located in the South, unless the Federal Government is willing and will protect colored students attending such institutions against physical violence at all times.

Howard, Meharry Expansion

(3) Howard and Meharry Medical Schools should be expanded only to the extent and proportion that all other medical schools are expanded by use of Federal funds.

Any contemplated expansion of Howard and Meharry should not be considered a major contribution to the needs of medical education for colored people.

(4) Pre-medical training for colored pupils and students in the South on the elementary, high school and college levels is substandard, and must be improved if suitable candidates are to be available for advanced training.

Scholarships Requested

(5) With regard to scholarships, Federal aid is recommended, through the Federal Security Agency, to needy students of all races in standard accepted medical schools. No jim-crow scholarships are desirable or wanted.

(6) Interneships and residencies are essential to sound training under present standards. The Hall-Burton Hospital Construction Bill includes an anti-discrimination clause as regards race. It is important that there be no violation of this feature of the law.

Public Health Integration

(7) The Public Health Service should particularly extend its program to both races in the South where it is most needed, and colored professional personnel should be integrated in its program, especially at the policy-making level.

(8) The most acute need for medical care for both races is in the South.

Doctors Fear Dixie

Colored physicians will tend to concentrate in the North and urban centers and will not move their families to many Southern areas where their services are most needed;

Unless these regions are made habitable for trained physicians and their families, and an atmosphere developed in which they can be free of mob violence and the humiliations of second-class citizenship.

GERMS KNOW NO COLOR LINE

Afro-American 21

News is coming out of Europe that is important.

The International Red Cross says it finds an unprecedented spread of tuberculosis in Europe and the increase in V.D. is "simply catastrophic." Baltimore, Md.

Syphilis has increased everywhere and will have disastrous effects on future generations.

V.D. in Great Britain is said to be the highest ever recorded. Sat. 11-15-47

The cause of this alarming situation is the absence of food for working men. Lack of food means loss of energy and steadily growing poverty leads to an increase in V.D.

In other words, tuberculosis, gonorrhea and syphilis are diseases most prevalent among poor people.

For some time, the rate of these diseases among colored people has been so high in the U.S. the white Americans have grown accustomed to referring to them as "colored people's ailments."

What has happened in Europe ought to be a revelation to these white people. They can see now that disease is no respecter of races; tuberculosis and syphilis attack poor white people just as they do poor colored people.

Baby's Death Indicts Hospital Jim-Crow

21 The Worker. New York, N.Y. Sun. 11-9-47

SAN ANTONIO, Tex.—In the modest sitting room of her home in San Antonio, a young Negro mother, her beautiful dark eyes full of sorrow, said to me: "Can you imagine how I felt when they turned me away at the hospital with my dying baby in my arms?" Sun.-11-9-47

Her first child, a little girl seven weeks old, had suddenly become very ill. The frantic parents and the grandmother rushed to the Medical and Surgical Memorial Hospital, where the baby had been born. There was an examination. There were consultations. There was an effort by the parents to have the child kept in the hospital overnight. Sun. 11-9-47

But the upshot was that the baby was handed back to the mother, who was advised to go home. The family left, went home.

It was getting late. Through the hurried aid of a white friend, the family secured admission to the Santa Rosa Hospital. There the baby died at 9 p.m. of the same evening.

"How will I ever know, how will I ever be sure, whether my baby might have lived—if her skin had not been dark?" the mother asked me.

*

THIS SINGLE terrible example throws a painful light upon the great sum of human anguish and suffering which lie behind the inadequate hospital facilities and medical care for the Negro people here, based upon the Jimcrow system.

The main hospitals of San Antonio, generally over-crowded and under-staffed, have pitifully inadequate space for Negro patients. This bad situation was rendered even worse by the closing down in early summer this year of the Richard B. Green Memorial Hospital, county-supported, where a large number of Negro patients had been able to receive hospitalization.

11-9-47

SUCH IS THE situation in San Antonio, a city where unspeakable sanitary conditions strike with special force at the health of the Negro and Mexican-American population. The Chamber of Commerce and the viciously anti-labor elements here pride themselves on having kept the city "open shop."

It is also the city of open sewers and naked slums. So rotted and overloaded is the antiquated sewer system that raw sewage seeps through cracks in the mains, and once in a while one will "blow," exploding with such force as to spout up suddenly right through the street.

NEGRO HEALTH AID DECLARED TO LAG

United College Fund Reports Inadequate Supply of Doctors and Other Professionals

Glaring disparities exist in every field of Negro health and welfare service, according to a study made for the United Negro College Fund, Inc., and made public yesterday. It declared that "Americans who would demonstrate practical democracy to the world must teach hope by helping to release our own minority groups from despair."

William J. Trent Jr is executive secretary of the fund, which has headquarters at 38 East Fifty-seventh Street.

The investigators found only one Negro physician for every 4,000 Negroes, compared with one white physician for every 900 of the nation's population. It was estimated that 13,000 Negro physicians were needed today.

While there is one white school teacher for every 122 children in American schools, there is one Negro teacher for every 201 pupils in the separate schools of the nation, it was declared. From this standpoint, the study said, 42,000 more Negro teachers were needed.

"The fund, in its campaign for the support of a large group of the Negro colleges, is not defending or attacking the separate school system," Mr. Trent said. "It is trying to make clear the size of the problem and the amount of educational work that must be done if we do not fall below the present standards."

1,400 Negro Dentists

Mr. Trent declared that there were only 1,400 Negro dentists in America out of a total of nearly 70,000 dental practitioners. He put the number of Negro nurses at about 8,000 among 400,000 nurses in the country and he found 1,000 Negro lawyers among a total of 176,000 attorneys. The Negro population is between one-eleventh and one-tenth that of the nation.

In a campaign that seeks this year $1,300,000 for thirty-three member colleges, the fund again will have Frank M. Totton, vice president of the Chase National Bank, as its chairman, and John D. Rockefeller Jr. as chairman of the national advisory committee.

Mr. Trent said students of Yale University and Wesleyan and Carleton Colleges had contributed nearly $6,000 to the fund. Sarah Lawrence and Princeton students will support the drive this year, he reported.

The fund will sponsor on April 19 at Times Hall, 240 West Forty-fourth Street, a debate between teams representing Cambridge University of England and Lincoln University of Oxford County, Pa. The latter, founded in 1854 "as a protest against the authorities at Princeton who denied admittance to Negro applicants," will have on its team Abdool Marraj of Demarara, British Guiana. He will be pitted against Ian S. Lloyd, a white student from Natal, Union of South Africa.

Richmond, Va. Times-Dispatch
April 11, 1947

A Remarkable Improvement

STATISTICS revealed during National Negro Health Week by the United States Public Health Service show that the average length of a Negro's life is now 57 years. Thirty-two years ago, BOOKER T. WASHINGTON called attention to the fact that the average life expectancy of his race was then only 35 years. He said it should be 50.

Although this improvement is cause for rejoicing, the Public Health Service reminds us that Negro life expectancy is still nine years less than that of the white race.

Partly responsible for this discrepancy is the high infant mortality rate among the colored race, 33 per cent higher than that for the whites. Tuberculosis, kidney disorders and pneumonia annually take a large toll among Negroes, and cancer, formerly relatively rare among Negroes, is annually causing more deaths.

The Public Health Service records show that while there is one doctor for every 750 persons in the general population of the United States, there is only one Negro physician for every 3,377 Negroes, and that while the Negro population increased 8 per cent during the last 10 years, the number of Negro doctors declined 5 per cent. There are 1,700,000 beds in the nation's hospitals, but only 20,800 beds in Negro hospitals, many of which are reported to be substandard.

The health and life expectancy of all elements of our population should be our immediate concern. Nutrition, sanitation, medical care and hospitalization of all elements must be improved, and prospects are that an appraisal of national health in another decade will reflect such improvements in the higher average life figure for the race that has struggled so successfully against such overwhelming odds.

Want a Long Life And a Merry One?

PM New York, N.Y. Fri. 4-11-47

BY SEYMOUR PECK

". . . What is health? It's not the great operation. It's not the surgeon and his sterile rubber gloves. It's not a test tube full of vitamins. Vitamins, yes. But not in test tubes—in people.

"Health is day to day living; the food you eat, the clothes you wear, the house you live in. . . . Health is the number of dollars a week your father earns. Health is the teacher in the fourth grade who sees you squinting and tells your mother. Health is love and understanding when you're an infant. All those things. Many more.

"You can't solve it with a quick, dramatic operation."

Thus spoke a character in *A Long Life and A Merry One*, Howard Rodman's fine drama on American health problems which the CBS Documentary Unit broadcast last Friday.

Rodman's play, sensitively written and often very moving, searched the national scene and found hill folk, in urgent need of medical care, living—and dying—unnoticed, found miners who must of necessity adopt a stoical attitude towards tuberculosis, found kids going to school in sunless, dilapidated shacks.

Though there are 15 million Negroes in America, only a handful of them can get to become doctors, according to *A Long Life and A Merry One*. Thousands upon thousands of people – not merely rich people – need psychiatric help, but none is forthcoming.

Medical Science Gets Better—and Costs More

"Medical science gets better and better," said narrator Van Heflin. "The better it gets, the more complicated it gets and the more it costs. And it's gotten so good that now medical care is beyond the reach of 80 per cent of us."

It is a frightening picture, and one that was put over with maximum effectiveness by the expert Documentary Unit production. Heflin's sincerity as narrator helped underscore all the tragic things Rodman put into his script.

If there is any complaint about *A Long Life and A Merry One*, it is that it may have lacked mass appeal. Why? Because most people like a story with one, two, or three leading characters—as in the movies. They associate themselves with these characters, they get to know them, they even come to share their pain. Rodman's script, being a succession of short episodes, had a great many characters, all of whom came in for a minute or two, all of whom were equally important.

How Does It Affect Us as Individuals?

Perhaps if Rodman had written about one single family and had somehow worked his observations on American health into the story of this family's everyday living, his play would have meant more to all the listeners who require simple dramatic construction.

I am not suggesting that Rodman should have done an Aldrich Family piece on his subject but rather that his play—like Robert Shayon's *The Eagle's Brood* before it—would have been more engrossing if it had picked a vivid human being for its focus rather than a collection of facts.

However, within the limits of his dramatic structure, Rodman wrote a very impressive play, and one that showed a rare feeling for American speech. He and CBS's Documentary Unit have every reason to be proud of *A Long Life and A Merry One*. For through such projects radio matures and gains new dignity.

Disease Infects Negroes Only?

Memphis World

CHICAGO. — Author - Scientist Julian Lewis says in the July issue of Negro Digest that "Contrary to the medical axiom claiming disease is no respector of race, sickle cell amenia never affects anyone who is not of African descent."

A very serious malady of which there is no discovered cure, sickle cell anemia is also the only known disease which is completely confined to a single race.

A relatively new disease, continues Dr. Lewis, who is a contributing editor of Negro Digest, whole families may be affected by the illness. According to Mendel's law of heredity, it is inherited as a dominant physical trait.

Discovered in Chicago's Central Free Dispensary about 25 years ago by Dr. James Herrick, the disease distorts the shape of red blood corpuscles into a sickle shape. It is from this trait that the disease was named.

"There is no cure for sickle cell anemia at present," the Negro Digest article states. "However, blood transfusions prove of value, but improvement is transitory and treatment has to be repeated.

This does not mean that cure is impossible, for scientists are already at work developing promising ideas which, if successful, will mean the saving of thousands of lives."

Deplorable state of Negro health cited as health bill is urged

Tribune – Los Angeles, California

NEW YORK — In a statement to a special House of Representatives sub-committee, the National Urban League last week endorsed HR Bill 1980, legislation proposing to increase school health facilities and raise standards of care for all children in economically distressed areas presently unable to finance adequate services out of local tax funds. Joint responsibility in administering the proposed school health program would be shared by local, state, and federal agencies. This, the Urban League statement declared, "would more nearly assure equitable services to Negro children in those areas where even the present quality of health care reflects the racial attitudes of the community." Sat-8-2-47

The endorsement said "approximately 3,500,000 Negroes between the ages of 5 and 17 years stand to benefit directly from a nationwide school health services program, with the largest group, 1,500,000, living in the rural South where impoverished conditions and undemocratic racial patterns deprive them of essential facilities and services for their proper development."

Highest Rate of Rejections

Selective service findings of World War II revealed the highest rate of rejections in any area of the country occurred among Negro selectees of the southeastern and south central states where 610 Negro young men per 1,000 processed were disqualified from Sept., 1944—Aug., 1945 for illiteracy and physical disabilities, the latter accounting for almost two-thirds of the rate, the Urban League continued.

If adopted, the Urban League said, the bill would provide "preventive and diagnostic services and treatment for millions of Negro children whose families cannot afford the high cost of adequate health care. Agricultural workers constitute approximately 40 per cent of all employed Negro men, or twice the rate of whites. The vast majority of these rural Negroes are employed as tenant farmers, sharecroppers and wage laborers on southerns farms and plantations. Victims of an antiquated system which still encourages a market of 'cheapest labor,' they are least able of any group in the nation to purchase goods and services, including medical care, to maintain minimum standards of decency and health. Victims also of a bi-racial pattern that has persisted from slave days, they are denied use of many of the meager resources established for health and welfare. Those resouces which are available are provided on a separate and inequitable basis."

In a comparison of the incidence of disease and death in the Negro and the white population, the League revealed: "The 1944 infant mortality rate for the nation was 60.3 per 1,000 live births among Negroes and 36.9 among whites. A new born Negro male infant has a life expectancy of 55 years; a white male infant has a life expectancy of 63 and one-half years. Among female infants the life expectancy for Negroes is 58 years, for whites 68 years. During 1943, 51 Negro mothers out of every thousand died in childbirth; the rate for white mothers was 21. Among Negroes the general death rate is 112.9 per 100,000 population, more than three times higher than the white death rate (34.3). Three times as many Negro children under five years of age die from pneumonia and influenza than whites. Heart diseases cause twice as many deaths among colored persons five to 24 years, and three times as many for the 25 to 45 year old groups as among whites of comparable ages. In the South the death toll from pellagra is 9 times greater for the Negro race.' Sat-8-2-47

Not only physical but mental diseases and defects would be treated under the proposed legislation, the Urban League said, urging nationwide support of the proposed legislation.

Bias Takes 10 Years Off Negro Life Span

(24 yes.)

Daily Worker, New York, N. Y.

By Federated Press

A 10-YEAR HANDICAP on the day of birth . . . that's what the average Negro baby starts with. While a white new-born child today may expect to live an average of about 64 years, a Negro child will live about 10 years less.

This difference is due to low income, overcrowding, poor sanitation, poor nutrition, lack of education and also to inadequate medical care. Most of the diseases which kill more Negroes than whites could be prevented by known health measures.

Medical care for Negroes is especially bad not only because they have in general a very low income, but also because their hospital facilities are limited and poor, and because prejudice prevents many Negroes from getting satisfactory medical, nursing and other technical training.

wed. 10-22-47

SEGREGATION IN separate wards or separate hospitals is widespread all over the country, and exists even in some of the hospitals of the U. S. Veterans Administration. Segregation restricts the number of hospital beds for Negroes and in many instances the accommodations and treatments are inferior.

This is what Dr. W. Montague professor at Howard University Medical School says about hospitalization for Negroes in the south!

"The basement 'colored ward' is notorious. Here no attempt at an aceptable hospital set-up is made. One sees white institutions which admit Negro patients long enough to permit them to be operated upon, but a few hours afterward shunt them over to a nearby Negro institution without staff, equipment, or technical knowledge for modern post-operative care."

•

THE NUMBER of trained Negro professional personnel is far too small. Most Negroes may study medicine at only two schools, Howard University Medical School in Washington, D. C. and Meharry Medical College in Nashville, Tenn. About 145 Negro physicians are graduated every year.

The Negro physician who would like to keep up his training by post-graduate specialization hospital staff appointments meets prejudice and open discrimination at every turn. Membership in a medical society is one way to keep abreast of medical developments—but in 17 states and the District of Columbia Negro physicians are barred from membership in the medical societies of the American Medical Assn.

wed 12-22-47

MANY UNIONS are involved in obtaining adequate medical care for their members. Trade unionists know how any division among their members, on any basis whatsoever, weakens a union.

Wherever unions are concerned with medical care, as member of the community, as contributors to community chests, as organizers of their own health services, it is to their advantage to work to udice in medicine. They must favor good medical care for all, and facilities to train the best possible medical personnel regardless of color.

21 1947

Georgia

Rome, Ga., News-Tribune
July 6, 1947

Negroes Organize Council to Assist In TB-VD Survey

An organization meeting of leading Negro citizens to plan the county wide case-find survey in connection with the Floyd County Board of Health TB-VD clinic to be conducted beginning July 9, was held recently at the Metropolitan Methodist Church to elect officers.

The Negro Advisory Council, which will work with the local Board of Health in conducting the survey among the Negro population of the city and county, includes the following: Josephine Watters, President; Dr. John R. Thomas, Vice President; John Franklin, Secretary, and Joe Houser, Assistant Secretary.

The council will plan meetings to be held later in an effort to reach the Negroes of the community for the voluntary chest X-rays and blood tests.

21 1947

Jesse Owens' Tour

Jesse Owens On Health And Hygiene Lecture Tour-Opened Series At Tunica, Miss.

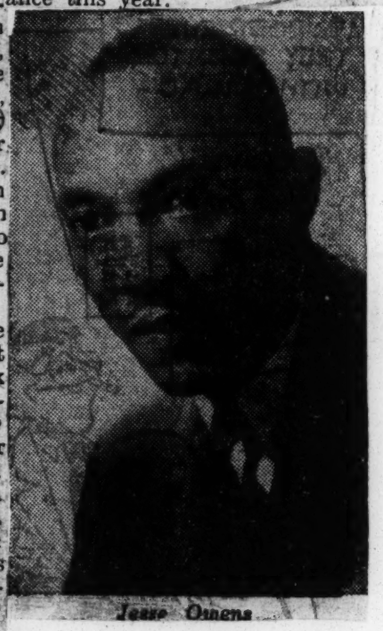
Daily World Atlanta, Ga.
Jan. 2-4-47

MEMPHIS, TENN.--The eyes of America's colored race, the attention of Ohio State Uni. alumni throughout the world, and the keen interest of Alpha Phi Alpha fraternity members, all was focused upon the state of Mississippi this week, where on Monday, January 27 the pride of colored people everywhere, Jesse Owens, opened his world tour as a professional public speaker --a lecturer on health and hygiene. Owens, the world's fastest human and holder of 18-world records in sport and the America team's hero in the last Olympic games, chose the subject of 'the Secrets of Sensible Sex.'

The colored hero of collegiate sports is now under contract at sizeable figures to tour and speak for Hygienic Productions, Hollywood educational motion picture producers, in conjunction with their famous new screen hit, 'Mom and Dad.' Owens is to appear at each performance, three times daily, in threatres from coast to-coast and will tour other countries later. His international tour will open at Tunica, Mississippi--an hour's drive southwest of Memphis. Many from here plan to attend.

Traveling in a new 1947 Lincoln custom-interior sedan and carrying with his theatre unit two attractive colored nurses, Owens' popularity at the box office in expected to result in record crowds. The hygiene motion picture 'Mom and Dad' has been playing to capacity audiences everywhere, since its recent release. 'Mom and Dad' is a brand new film, with an all-star Hollywood cast headed by Lovely June Carlson, 20th Century-Fox star and Hardie Albright, capable United Artists character actor. It is a story of modern-day youth, the pitfalls which lead millions into sexual delinquency and it contains powerful and bold medical sequences depicting the 'Fact of Life' and the ravages of venereal diseases which are sweeping this country and the world today.

Jesse Owens tour is under the personal direction of Billy Weinberg ace advance agent of Hygienic Productions world-wide organization. All arrangements for launching Owens all-colored theatre unit of 'Mom and Dad' were handled by movie producer Kroger Babb. The company will spend $100,000,00 exploiting Owens' personal appearance this year.



Jesse Owens

Educators, Doctors Attend Session on Student Health

NEW YORK (ANP)—The third National Conference on Health in colleges concluded a four-day conference at the Hotel New Yorker last week. Nineteen committees composed of top educators, physicians, dentists, and others discussed a variety of problems relating to the status of student health.

The main emphasis was on the progress and present development of health programs in colleges and outlining adaptable measures for health and physical education, health services, healthful environments for students during college years, and preparation for individual and community responsibilities.

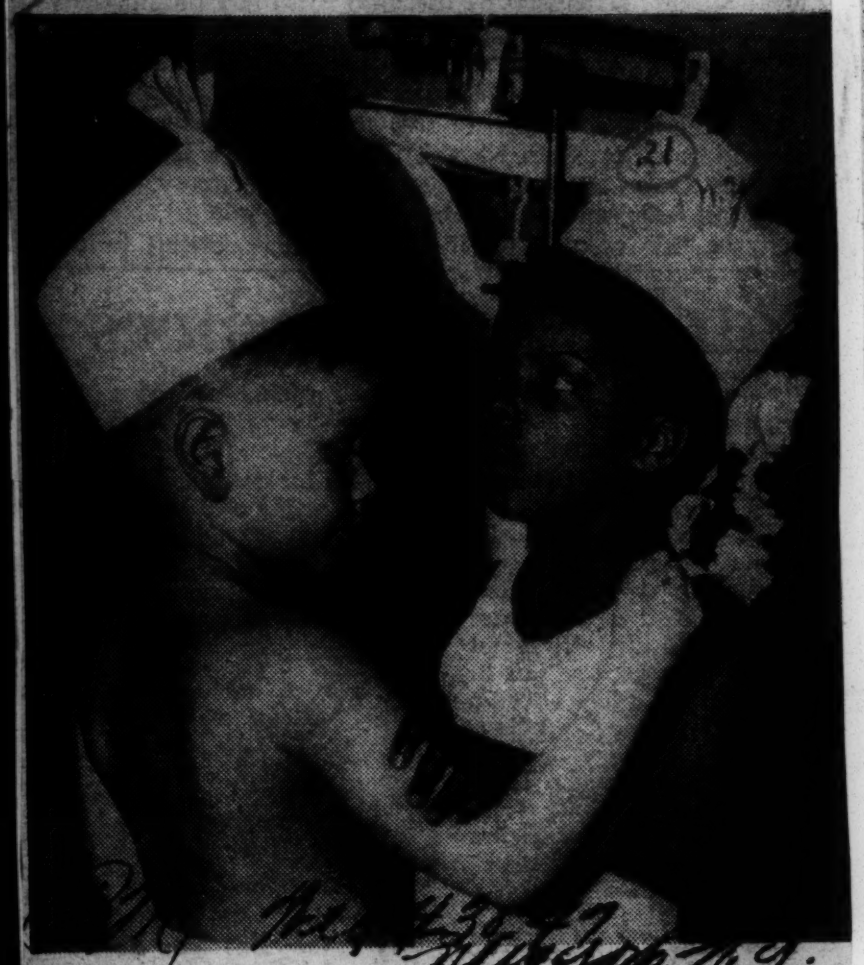
The conference originated at the University of Syracuse in 1931 under sponsorship of the President's Committee of 50 on College Hygiene, the American Student Health Association, and the National Health Council. It convened again in Washington in 1936.

Outstanding educators in attendance included: A. W. Dent, president of Dillard University, New Orleans; H. Council Trenholm, president, Alabama State Teachers College, Montgomery; Dr. Micheal J. Bent, dean, Meharry Medical College, Nashville; Mrs. Jennie D. Taylor, Tarboro, N.C., executive director, N.C. Student Health Education Association;

Dr. Charles C. Hawkins, West Virginia State College, Institute; Clarence W. Davis, Miner Teachers College, Washington, D.C.; Warren McKenna, director, student health service, Xavier University, New Orleans; James G. Faustina, supervisor of public health education, New Orleans; Dr. William A. Mason of the U.S. Department of Health;

Prof. Leo C. Woods and Howard F. Spence of Coppin Teachers College, Baltimore; Drs. Paul B. Cornely and John A. Turner of Howard University, and Dr. LeRoy Swift of N.C. State College, Durham.

NEW YORK'S HEALTHIEST



Here are the winners of the Children's Aid Society annual Children's Health Day contest: Health King Michael Sinutko, five, 568 Ninth Ave., who weighed 50½ pounds, is 45 inches tall and Health Queen Lucille Green, five, 130 W. 132 St., 53½ pounds, and 46¾ inches tall.

Photo by Bernie Aumuller, PM

HEALTH GAIN NOTED IN CENTRAL HARLEM

20% Improvement Since 1931 and Better Attitude Toward Education Are Reported

JOINT CELEBRATION HELD

Center Marks 10th Anniversary as Tuberculosis Group Observes Its 25th

The general health of central Harlem has improved 20 per cent since 1931, reports compiled by the Central Harlem Health Center showed yesterday. Deaths have dropped from fifteen to twelve a thousand, and "the general attitude of the population toward health education has also improved," spokesmen for the center declared.

The information was released as a part of the joint celebration marking the tenth anniversary of the Central Harlem Health Center Building of the City Department of Health, 2238 Fifth Avenue, and the twenty-fifth anniversary of the Harlem Tuberculosis and Health Committee, which opened its three-day session at the center.

The statistics, compiled by Dr. Vernon A. Ayer, director of the health center, recognized a trend for the better, he said, although the rate for tuberculosis remains almost unchanged, with the case rate for non-whites almost four times the rate for whites.

Dr. Ayer said that he was "inclined to be hesitant about releasing figures on tuberculosis, since the conditions that make it prevalent have too many possibilities of misinterpretation." He declared that the aim of the center was to overcome the hesitancy of the people toward reporting their illnesses, and that the only sure thing to say about the high rate in Harlem was that last year 160 non-white and thirty-five white deaths a 100,000 gave the entire city a rate of forty-two deaths a 100,000.

He asserted that there was a problem in housing and economics, generally, "since Harlem residents are for the most part in the low-income group, have poorer food and lack information that they ought to have about good health." He believed that "many residents remain hesitant about telling the 'health facts' about Harlem, but this frankness will lead to improvement."

The maternal death rate has decreased from 15 to 3 a 1,000 and the infant death rate dropped between 1931 and 1946, from 91 to 53 a 1,000 births, records showed. In the same period, the death rate for infants less than 1 month old dropped from 48 to 38 a 1,000.

Dr. Ayer said that marked improvement was also noticeable for infants 1 month to 1 year old, death rate dropping from 43 to 15 a 1,000. The population estimate for Central Harlem is 210,000. Last year, 3,878 babies were born in this section.

Dr. Samuel Frant, Deputy Commissioner of the Health Department, presided at the opening meeting, which also dedicated a permanent educational health exhibit for the center, with visual education aids in the form of graphs, photographs, charts, pictures and microscopes set up to display information about nutrition, child health, tuberculosis, social hygiene and cancer. Other exhibits are planned as the urgency changes.

The progress of the work against tuberculosis was described by Dr. Herbert R. Edwards, executive director, New York Tuberculosis and Health Association. Mrs. Ruth Logan Roberts spoke for the Harlem committee and Mrs. Charlotte E. Anderson for the twenty-fifth anniversary committee. "We cannot hold a mass meeting on health—it is better to approach the community leaders and ask them to lead their people to better health," Mrs. Roberts said. She reported cooperation by trade unions, churches and social clubs.

"We are moving from that day when we struggled hard to get the community to accept facts about health conditions," she said, "and we are less and less inclined to accuse the white people of spreading falsehoods about us and our poor health."

21 1947 The South

Defective Teeth Common in South

RICHMOND, Va. — Thirty-nine percent of all pupils who attended summer school here had defective teeth, Dr. C. L. Outland, medical director found.

The percentage Dr. Outland found was three times as high among Negro pupils as among whites. This situation exists among the Negro and poor white children because there is no adequate public health service and the low incomes of the parents do not permit private medical and dental care.

X-Ray Clinic for Negroes Is Scheduled

Richmond Va. Times-Dispatch Sun. 2-9-47

Hundreds of chest X-rays are expected to be taken during the coming week at the Colored Recreation Association, 112 West Charity St., in connection with the concentrated health survey being made in Nursing District No. 9.

(21 Va.)

The area, first section of the city in which such work will be undertaken, is bounded on the north by the railroad track from Munford to St. John's Streets, on the east by St. John's from Bacon to Broad Streets, on the south by Broad from Adams to Munford Streets and on the west by Munford from Boyd to Webster Streets.

Participating at the X-ray clinic will be representatives of the Richmond Medical Society and of the Colored Graduate Nurses Association. The clinic has been preceded by a house-to-house canvass in which residents were informed of the clinic plans and by the distribution of promotional literature by insurance organizations. Block leaders have drawn up a family roster for use in the survey, and ministers, Boy Scouts and numerous other individuals and organizations have co-operated.

Joint Sponsorship

The clinic, to be held daily from 2 to 4 P. M. and 6 to 9 P. M., is being sponsored by the City Health Department, the School Board, Instructive Visiting Nurses Association, Richmond Tuberculosis Association, Bureau of Catholic Charities, Family Service Society, Social Service Bureau and other groups.

Pupils at Baker, Booker T. Washington and Van de Vyver Schools were X-rayed during the past week so that most of the clinic time will be available for adults. The clinic is open to any resident of the area 12 years of age or older, and those who attend will receive double barred cross pins showing they have participated in the community survey.

Sponsors of the project emphasized yesterday that the X-rays will be free, that only two or three minutes of a person's time will be required, that it will not be necessary to undress and that reports will be confidential.

Richmond Va. Times-Dispatch
May 16, 1947

High Health Record in One-Room School Held Due to Efforts of Teacher, Widow of Doctor

(21 Va.)

By Paul Saunier, Jr.

Times-Dispatch Staff Writer

HALIFAX, May 15 — Mrs. Marion Smith, the 41-year-old teacher of Pannel School, a one-room Negro school on a dirt road on the northwest edge of Halifax County, stood on the rickety steps of the unpainted building and explained, a little hesitantly, how her pupils were able to make such an outstanding health record in the five-point program.

"I'm a doctor's widow," she said, thoughtfully, "and I've got three children of my own, and I guess that's why I try so hard with these children in my school."

"I can't give them much of many things here," she said, "but I can push them on health, and maybe send them away healthier than they would have been."

Of a total of 22 defects in the five-point program (teeth, eyes, ears, throat, and weight) noted at the beginning of the school term last Fall, Mrs. Smith has been able to inspire parents of her pupils to correct 19 of them.

"Not all of them were new this year, though," she said, brushing back a few strands of hair the dusty wind had blown into her eyes. "I've been here three years, and some of the talking I did to parents three years ago has just taken effect."

Pupil Needs Glasses

She pointed through the open door, where several of her pupils had gathered. "That little girl there with the glasses," she said. "Her work is so much better since she got them. But I've got one little boy who needs glasses, and I've even spent teh night over there with his folks, trying to talk them into getting them for him. Some day I guess it'll take effect."

All of her 36 pupils are the children of sharecroppers, Mrs. Smith explained, and many come from large families. She holds school from 8 A. M. to 2 P. M., rather than the usual 9 A. M. to 3 P. M., so that the pupils can walk home in time to help with the farm work.

"The county told me I could let out at two so long as I rang the bell at eight," she said seriously, "and I think that's better."

Mrs. Smith boards in the neighborhood. She visits her children, now at her sister's home in South Boston, on week ends. She attended North Carolina College at Durham for three years, and is teaching under an "emergency certificate."

"I'd like to go away for more schooling, and get a regular certificate," she said wistfully, "but there's not much in that line that a widow with three children can do."

Despite the handicaps of teaching seven grades in one room, Mrs. Smith is proud of some things in her little school.

"Everybody here has a place to sit," she said. "We got some more seats from the county this year, and with some doublin' up they can all sit down. And I make everybody bring a lunch. I tell the parents that if all you can give them is bread, they have to have a lunch. And when time comes to eat it, we all eat together, and say grace. I want them to learn table manners."

"Once in a while," she admitted, "somebody comes without a lunch and somebody else shares with them. But then I talk to the parents, and everything is all right. They all have enough to eat. Sometimes their mothers just don't get time to make the lunch.

"The school league, which is the parent-teacher group, got some paint in Lynchburg three years ago and painted the inside here," she continued proudly, "but I wish we could get the outside done. The league told the county they'd put the paint on if the county would buy it. We're right on the road here, and the children would be prouder to come to school if it was painted."

Windows Repaired

She pointed to the windows, and the coal stove. "The county fixed the windows just recently, though," she said, "and they provide the coal in the Winter."

On Monday, when 3,000 Halifax County five-point school children will parade in South Boston or Halifax as part of a "Health and Physical Education Day," sponsored by the Halifax County Health Council and other civic organizations, Mrs. Smith hopes to be able to load her 36 pupils into someone's truck and let them see the parade, the United States Marine Band and Halifax County's favorite son, Governor "Bill" Tuck. The white school children's celebration will be held in South Boston and the Negro portion of the program in Halifax. Prizes will be awarded to schools with the highest percentages of health improvement, and the chances are that little one-room Pannel School may win one.

But even if the pupils and Mrs. Smith aren't able to get there, and even if they don't win any prize, the teacher's simple statement still would stand.

As she said, "I can't give them much of many things here, but I can push them on health, and maybe send them away healthier than they would have been."

—Staff Photo

Mrs. Marion Smith Checks on Pupil's Teeth

Teacher's One-Room School Has Excellent Health Record

Memphis Dentists Attend Mid-Winter Clinic In Chi

World Memphis, Tenn. 2-18-47

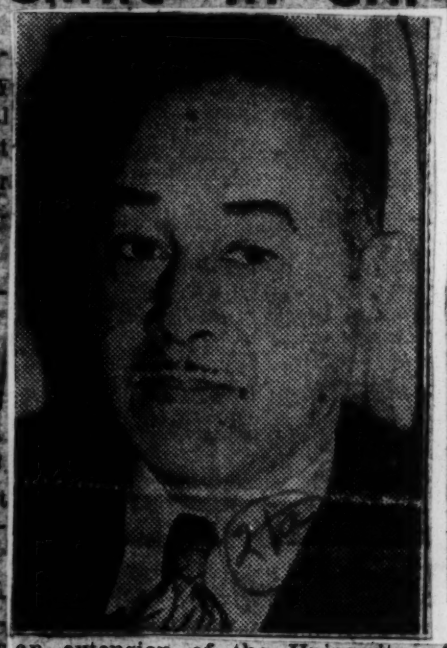
Six of Memphis's leading dentists, all members of the Shelby County and Pan-Tennessee Dental Societies, were in attendance last week at the famed Mid-Winter Clinic of the Chicago Dental Society.

The clinic was held at the Stevens Hotel February 10-13.

Local dentists attending included Doctors R. Q. Venson, Cooper E. Taylor, W. E. Porter, C. J. Bates, A. K. Smith, of Memphis; and Dr. J. E. Burke, who resides in Forrest City, Ark, but maintains membership in the local dental society.

All the men attending the Mid-Winter Clinic, which has held annual sessions for more than eighty years and recognized as one of the world's most outstanding projects in the field of dentistry are Associate Members of the Chicago Dental Society, and as such, enjoyed all the privileges and facilities offered at the Clinic.

One spokesmen for the local group pointed out that "the members of the Shelby County Dental Society also have one hundred per cent representation in the Pan-Tennessee Dental Society. He observed that "the attendance of local dentists at the Mid-Winter Clinic is a phase of a long-accepted practice of Members of the Shelby County and Pan-Ten. Societies of keeping abreast of the latest developments in the field of Dentistry and of forming contacts and associations with the leading men in the profession." The Memphians are also members of the National Dental Association 2-18-47



ISSUES CALL - Dr. W. M. Springer, Cincinnati, Ohio, Chairman of the Executive Board of the National Dental Association reports great progress by the Wolverine Dental Society, Detroit, Mich. under the Presidency of Dr. J. W. Collins in their plans as hosts to the Thirty fourth Annual Convention of the National Dental Association to be held in Detroit, Mich, August 11 to 15. Daily World.

Dr. Springer says that the Executive Board approved the securing of the Horace H. Rackham Educational Memorial Building in Detroit, an extension of the University of Michigan as the scientific and business convention site for this meeting. This new spacious air-conditioned building provides ample scientific halls especially designed for such educational purposes as well as well lighted halls and foyers to be utilized for the modern up-to-date exhibits of advanced dental equipment and supplies.

The Executive Board also appointed Attorney Belford V. Lawson, widely known and prominent Washington, D. C. Lawyer as General Council to the Organization. The rapid expansion of the Association necessitated the retaining of legal advice now that they are entering into aeral and State Bills that pertain to the profession of dentists and that tive particlpation relative to all fed will affect the welfare of thier dental patients. June 8 11-47

Six Admit Ban, Four Sidestep Issue; Some Ask NDA for Recommendations

Afro American, Baltimore, Md. 2-22

Dr. Dean Says Results Reveal All Need Not Be Confined to Howard or Meharry for Training

Sat. 3-24-47

By JAMES L. HICKS
NNPA Service

WASHINGTON

Twenty-seven of 45 dental schools polled in a Veterans' Service Committee of the National Dental Association's survey said they consider applicants without regard to race, creed or color. Several urged the NDA to recommend qualified colored students for admission to their schools.

Commenting on the results of the survey, Dr. Millard R. Dean, committee secretary, said:

"It is enlightening to find the large proportion of schools willing to accept qualified students when the opinion heretofore has been that they all must apply to Howard University or Meharry Medical College for such training."

Six Curt Replies

Six schools replied that they had no place for colored dental students; four "sidestepped" the issue. The College of Dentistry of Baylor University, Dallas, Tex.; the University of Louisville in Kentucky, and the University of Texas answered no, but the University of Texas said it was "anxious to forward a movement for the establishment of a medical and dental school in Houston."

Dean Frederiek C. Elliott of the University of Texas Dental School, said that he believed such a program could be inaugurated in the next two years. The University of Oregon, the Medical College of Virginia at Richmond, and the University of Tennessee, Memphis, said they reject these students.

Schools sidestepping the issue were the University of Kansas City, Kansas City, Mo.; the University of Buffalo, Buffalo, N.Y.; the Baltimore College of Dental Surgery, and the Chicago College of Dental Surgery of Loyola University.

Matter of Quota

Acceptances ranged from a quota of three, which Western Reserve University, Cleveland, said it can accommodate in its freshman class, to the unequivocal statement of Dean Rene Rochon of the University of Detroit that:

"In our school there are no holds barred when it comes to admission." Dean Allan G. Brodie of the College of Dentistry of the University of Illinois, said his school was "surprised" that so few applied for admission, since it is known, "there is great need for their service." Sat. 3-24-47

The State University of Iowa, Dr. Dean's alma mater, said any student applying from Iowa would have his name placed before the application board "without reference to race." New York University reported that three have been accepted for its September classes and another was scheduled to come up for interview.

Columbia University said it would appreciate applications. The University of Nebraska said that one such applicant would "undoubtedly be accepted shortly."

Southern Calif. Wants More

Dean Basil G. Bibby of Tufts' Dental School, Boston, said he though the high tuition rate at Tufts was the discouraging factor to colored students. The University of Southern California wrote that with only two freshmen and two seniors in its dental college, it "could take care of more."

Other schools stating they accepted all students included:

The University of Michigan, University of Pennsylvania, Northwestern University, University of California, Forsyth Dental Infirmary of Boston, University of Pittsburgh, College of Physicians and Surgeons, San Francisco; Marquette University, University of Minnesota, Temple University, and the universities of Montreal, Alberta, Toronto and McGill in Canada, and Dalhousie University in Halifax, Nova Scotia. Dr. William T. Grady of Washington is chairman of the committee which made the survey.

Survey Of America's Dental Schools Shows 27 Admit Negroes, Others 'Sidestep' Issue

Afro American, Baltimore, Md. 2-22-47

By JAMES L. HICKS
NNPA Staff Writer

WASHINGTON, D. C.—Opportunities for the training of qualified colored students who desire to enter the dental profession are highlighted in a survey of 45 dental schools conducted by the Veterans' Service Committee of the National Dental association.

In answer to a query from Dr. Millard R. Dean, committee secretary, as to whether qualified colored students are admitted to their dental colleges and whether they have current vacancies for such students, 27 of the 45 schools polled said they consider applicants without regard to race, creed, or color, and several accept Negroes under the NDA to recommend school of dentistry of Louisville does not rated in the next two years. Negro students for the The three other schools declaring they had no place for colored students were the dental

Sidestepped Issue

University of Texas said college of the University of Oregon, the Medical College of Virginia at Richmond, and the University of Tennessee at Memphis.

Schools sidestepping the issue included the University of Kansas City, Kansas City, Mo.; the University of Buffalo, Buffalo, N. Y.; the Baltimore College of Dental Surgery, and the University of Texas' dental college of Dental Surgery of Houston.

Frederick C. Elliot of Dean Frederick C. Elliot said that he had discussed a school with colored ns in Houston and that

Ten Applicants Apply

at his school believed Of the 27 schools stating they program could be inaugu-

Sat. 3-30-47

It had no facilities available for the education of colored students but it was "quite anxious to push forward the movement for the establishment of both a medical and dental school in

Houston.

The College of Dentistry of the University of Texas, Dallas, Texas, wrote: "There are no Negro students at this college and we do not have a place for them." The University of Louisville, Ky., said: "We are sorry to inform you that the physicians in officials at

such a

accept colored dental students, the acceptances ranged from a quota of three colored students, which Western Reserve university at Cleveland said it can accommodate in its freshman class, to the unequivocal statement of Dean Rene Rochon of the University of Detroit that "In our school there are no holds barred when it comes to admission."

Dean Allan G. Brodie of the College of Dentistry of the University of Illinois said his school was "surprised" that so few colored students had applied for admission to the dental college since it is known "there is great need for their service."

The State university of Iowa, Dr. Dean's alma mater, wrote him that only one colored student had graduated from its dental school since he himself graduated in 1932, but said any colored student applying from Iowa would have his name placed before the application board "without reference to race."

New York university's college of dentistry reported that three colored students have been accepted for its September classes and another was scheduled to come up for interview in the near future.

Columbia universitey said it has no quota system and would appreciate applications from qualified colored students. Dean Houghton Holliday, chairman of the school's committee on admissions, said colored dental students in the past "have frequently ranked very high" in their classes and proved to be a "credit to Columbia."

Credit To Institution

The University of Nebraska said that it had far more applications for admission than the 32 students of which its freshman dental class will be composed, but stated that in going over applications it appeared that one colored applicant would "undoubtedly meet the requirements and will be notified of his acceptance shortly."

Tufts College Dental School in Boston said it had normally made it "somewhat easier" for colored dental students to enroll than for other students, but that the withdrawal rate among colored students is "far in excess" of that of white students and because of that problem it presently had only one colored student enrolled in the school.

Dean Basil G. Bibby of Tuft's Dental school said he thought the high tuition rate at Tufts was the discouraging factor to colored students.

Dr. Dean Comments

The University of Southern California wrote Dr. Dean that it only had two freshmen and two senior students in its dental college but "we could take care of several more."

Dr. Julio Endelman, dean of the dental college at USC, pointed out that the colored population of Los Angeles has increased considerably in the last three years and that there are not sufficient colored dentists to "take care of this section of the population." Fri. 5-30-47

Other schools stating they accept colored students without regard to race, creed or color, included the University of Michigan, University of Pennsylvania, Northwestern university, University of California, Forsyth Dental Infirmary of Boston, University of Pittsburgh, College of Physicians and Surgeons, San Francisco; Marquette university, University of Minnesota, Temple university, and the universities of Montreal, Alberta, Toronto, and McGill in Canada, and Dalhousie university in Halifax, Nova Scotia.

Commenting on the results of the survey, Dr. Dean said:

"It is very enlightening to find the large proportion of schools willing to accept qualified colored dental students when the opinion heretofore has been that they all must apply to Howard university or Meharry Medical college for such training."

Dr. William T. Grady of Washington, D. C., is chairman of the committee which made the survey. Fri. 5-30-47

21a

Pittsburgh, Pa. Courier Sat. 2-1-47

NEW DENTAL INVENTION—Dr. A. E. McDonald, right, nationally known authority in the field of psycho-therapy and the control of fear and pain of dental patients, exhibits his new sleep machine at his laboratory, 7440 Gentilly Boulevard, New Orleans. This machine, Dr. McDonald states, may revolutionize the practice of dentistry.

Prominent N. O. Dentist Invents 'Sleep Producer'

Pittsburgh, Pa. Courier

21a Sat. 2-1-47

NEW ORLEANS—A new sleep-producing machine, designed to possibly revolutionize the practice of dentistry, has been invented by Dr. A. E. McDonald, national authority in the field of psycho-therapy and the control of fear and pain of dental patients, who operates a polydental clinic at 7440 Gentilly Highway here.

In exhibiting his new machine, Dr. McDonald asserted that no drugs ar anesthetics are required in its use. The patient simply gazes at a revolving disk while the dentist gives suggestions which cause the patient to quietly relax and fall into a deep sleep. Extractions, simple surgery and grinding of teeth can then be performed without pain ar the knowledge of the patient, ad

INVENTED FOR HUMANITY

Interesting enough, Dr. McDonald was optimistic in declaring that he would not sell the machine, but will give it to the dental profession free. He stated, "I am only trying to give back to suffering humanity a little of the knowledge for the relief of pain that the Great Dentist has given to me. In the next few years dentists everywhere will be using machines of this type to control all fear and pain of dental patients.

With the use of his machine, the dentist can keep a patient asleep for short periods of time not to exceed a half hour which is long enough for an average dental operation, Dr. McDonald continued. He further pointed out that through the use of this device bleeding, pain, suffering, torture, agony, discomfiture, nausea, sickness and after pain when the patient is awakened is eliminated.

Meharry Prexy Heads World Dental Group

Pittsburgh Courier (21a)

Pittsburgh Pa. Sat-8-16-47

NASHVILLE, Tenn.—Dr. M. Don Clawson, president of Meharry Medical College, was named president of the International College of Dentists Monday. He became the first American to head the organization in forty-seven years.

Dr. Clawson was unanimously elected president of the International College at a meeting at the Statler Hotel in Boston, Mass. He succeeds Dr. Rene Jaccard, Geneva, Switzerland, who had held the office since 1937.

FORMED IN 1887

Delegates from twenty-one of the thirty districts of the college attended he meeting, first ever held in the Unied States. In the absence of Dr. Jaccard, who is ill, he secretary general of the college, Dr. Elmer Best, Minneapolis, resided.

The International College of Dentists was founded in 1887 in Tokyo, Japan, by Dr. Louis Ottefey, an American dentist, who headed the organization until 1900. Dr. Clawson is the first president from the United States since Dr. Ottefey went out of office.

RETURNED TO U. S.

From 1931 to 1942, Dr. Clawson presented the college as regent of the Twenty-ninth District, made up of Turkey, Iran, Iraq, Lebanon, Syria, Palestine, Trans-Jordan, Bahrein and Saudi Arabia. After his return to America in 1914, he transferred his membership to the First District (United States).

He was elected and served as president of the United States section of the college in 1944-45.

21a 1947

Survey Shows Dentistry To Be Listed High Among Professions

Norfolk, Va. Journal and Guide 21a

By EMORY O. JACKSON

BIRMINGHAM, Ala.—(ANP) — "Dentistry is America's billion dollar a year profession among the 'big five professions'." So spoke Dr. E. W. Taggart, president of the National Dental association which held its 34th annual convention in Detroit Aug. 15. Sat. 8-30-47

The "big five professions" are dentistry, theology, medicine, teaching and law, according to Dr. Taggart, a pioneer with the NDA since 1935.

Dr. Taggart sets the average annual income of a dentist at $7,000. Practice is not much hampered by racial barriers, even in the South. Along these lines, the dental profession is more progressive than is the field of medicine. For instance, in Alabama, Negro and white dentists are admitted to the same state dental organization.

PROBLEMS FACED

Dentistry is faced with two big problems, supply and distribution. The problem of supply was taken up by Dr. Taggart in a radio speech on Aug. 10, the eve of the convention's opening.

The present supply of dentists in the United States is inadequate to meet the demands for dental care and service, despite the fact that only about 22 per cent of the population visits the dentist annually with any degree of regularity. Journal and Guide

There are approximately 70,000 dentists in the United States of which 60,000 are practicing. Of this number, about 1,600 are Negro dentists, with about 1,500 listed in the NDA membership. Dr. Taggart estimated that it would take five times the present number to bring the supply into adequacy. Norfolk, Va.

YOUTH SOUGHT

He asserted that one of the highlights of the convention was the proposed "formulation of a guidance program directed at the youth of colleges, high schools and every community in the nation, for the purpose of attracting and guiding youth into the dental profession."

He went on to say that most children suffer from the quite prevailing ailment of decaying teeth and that 96 adults out of each 100 will be a victim of dental disease at the age of 45. He said that army statistics showed that one out of every five rejected by the selective service system for physical reasons was rejected because of dental defects. Sat. 8-30-47

QUESTIONS POSED

The NDA president declared that the situation posed two questions: Lack of awareness by the general public of the importance of dental health to general health. Eighty per cent of the infections and diseases originate in the mouth. This problem is to be coped with by education, and the diminishing supply of dentists. The dental profession loses annually by death or retirement 24 dentists per 1,000. To maintain the ratio of dentists to the population there should be 2,500 new entrants yearly.

In the problem of distribution, sixty-five per cent of the Negro dentists are located in the North with over two-thirds of the Negro population in the South.

DISTRIBUTION

Alabama has one dentist per 14,000 people while the ratio in Mississippi is 35,000 to one dentist. About 152 of the 200 Negro dentists in Illinois live in Chicago. Fourteen of the 51 Negro dentists not limited to practice by race, in Alabama are in Birmingham.

Negro dentists in the South are In Nashville, a Negro dentists has all his practice with white people. In Huntsville and Sheffield, Ala., a Negro dentist has 60 per cent of his practice among white people and in Columbus, Ga., one has 40 per cent of his practice with whites.

The field of dentistry is not overcrowded. It is a money making field. It is a fair field. The figures revealed establish these three facts.

In 1935, the NDA was in the red. Today it has in its treasury over $16,000. It is able to launch its increase-the-dentist-project. Sat.

Dr. Taggart has been a member of the NDA since 1935 when it met in Louisville with only eight present. He served six years as chairman of the executive board and also as chairman of the exhibit committee. 8-30-47

DR. ROSCOE F. LEE FIRST NEGRO DENTIST ACCEPTED AS DIPLOMAT

Baltimore Afro-American

Washington, D. C.—(NNPA).—Dr Roscoe F. Lee, a dentist, has been notified by Dr. Leslie M. Fitzgerald secretary-treasurer of the American Board of Oral Surgery, Dubuque, Iowa, that he is now a diplomate of that board. 21a

So far as records reveal, Dr. Lee is the first colored dentist ever accepted as a diplomate by the American Board of Oral Surgery, admission to which is based upon examination. Des Moines, Iowa

Dr. Lee took the examination early in November at the Blackstone Hotel in Chicago. He was the only colored dentist in the group.

After he had submitted a dozen cases, he was orally examined and then given a batch of X-ray sheets and told to analyze them. After he had made his analysis, he was told it would not be necessary for him to return on the second day of the examination. Thurs. 11-20-47

Dr. Lee is a graduate of both the College of Liberal Arts and the Dental College at Howard University and he interned at Freedom's Hospital. Later, he organized in 1926 the department of oral surgery at Freedom's which he headed for about ten years.

Dr. Lee also did special work in oral surgery under Dr. Sterling V. Mead, who has a dental hospital here on Sixteenth street. He studied under Dr. Reed O. Dingman at the University of Michigan and has taken observation courses at the Mayo Clinic, Rochester, Minnesota. 21a

Dental Health

Defender

An Educational Service Of The American Dental Association Chicago, Ill.

HISTORY OF DENTISTRY

Sat. 12-20-47

Dentistry as a modern science and profession is only 100 years old. It had its beginning with the founding of the Baltimore College of Dental Surgery in 1840 by Dr. Horace A. Hayden and Dr. Chapin A. Harris. This was the first Dental College in the world.

Before 1840 dentistry at best had been merely a trade or craft, tho as far back as history goes there are records of humanity's efforts to cope with dental disease.

The peoples of ancient Egypt, Rome and Greece, all employed dentistry, in varying crude forms, but such attempts as they made to repair the ravages and ea se the pain caused by dental decay, were enveloped in superstition and myth ...Practice was limited almost entirely to extraction and practitioners had scarcely more equipment, or skill than other artisans.

Little or no progress was made until the seventeenth century, when a Frenchman named Pierre Fauchard,--wrote books which anticipated modern dentistry in all its phases. This however, was only a theoretical advance and practice remained primitive.

After the efforts of Dr. Hayden and Dr. Harris had made dentistry a profession by affording a center for education and experiment, dentistry made rapid strides towards full scientific stature ...The discovery of nitrous oxide and ether as anesthetics in the early 1840's was the greatest single contribution not only to dentistry, but to medicine as well, for it made possible the whole development of modern surgery. 21a 12-20-47

Both of these discoveries were made by dentists, Dr. William Morton, of Boston and Horace Wells of Hartford, Conn. The discovery of the x-ray, the development of technique for restoration of teeth, and newer knowledge of pathology and bacteriology all have enabled the dental profession to steadily enlarge its service to humanity.

Your local Dental Society will be glad to answer any questions relating to this article.

By Albert Deutsch

Surgeon Blasts Racial Bias Of American Medical Assn.

The President's Committee on Civil Rights, in its splendid report last week, alluded to widespread racial discrimination in American health services. It also referred to the especially shocking Jim Crow practices in the Nation's capital. Had the report gone into detail, it might have pointed to one of the most monstrous practices—the barring of many qualified Negro physicians from membership in the American Medical Assn. (AMA) because of their race.

Deutsch

It is a shameful fact that Negro doctors in Washington and throughout the South cannot join the AMA because the local district medical societies bar them from membership. The AMA could very easily overcome these local barriers, if it were minded to, but it has shown no inclination to lift them in the name of democracy. The persisting discrimination not only hits the democratic rights of Negro doctors; it impairs their opportunities for professional and economic advancement. Excluded Negroes cannot attend the scientific sessions of medical societies, and hence can't keep in touch with new developments in their art. Lack of medical society membership bars them from insurance against malpractice suits—an important economic problem of all doctors. It bars them from many medical posts.

Dr. Fishbein Reminded Of 77-Year-Old Color Bar

Dr. Charles R. Drew, professor of surgery of Howard University Medical School and medical director of Freedman's Hospital in Washington, recently entered into an extraordinary correspondence on AMA discrimination with Dr. Morris Fishbein, editor of the AMA *Journal*. Dr. Drew is the internationally famous expert on blood plasma who pioneered in the establishment of military blood banks. He is technically a Negro—and proud of it—though his skin is whiter than Rep. Rankin's.

Dr. Drew, in his letter, pointed out that the American Medical Assn. in 1870 had supported the District of Columbia Medical Society's action in barring Negro doctors from the local society, which automatically barred them from the AMA.

"Today, 77 years later, this ruling still stands," Dr. Drew wrote. "The men in Washington, the Nation's capital, are still rejected, though there can be no doubt of their qualifications by any standards, and so likewise are all the Negro physicians who happen to live in the South."

Dr. Drew describes the high standards required of the faculty and staff members at Howard Medical School and Freedmen's Hospital—both Government-supported institutions established for Negroes. The chief of every department and departmental subdivision, for instance, must be a certified specialist in name and in practice. The famous Negro surgeon continues:

Highest Medical Ranking— Not Good Enough for AMA

"Match these standards with those of the great hospitals of the land and they will be found good. Yet these men are not granted the privilege of discussing common problems with fellow physicians in the learned councils of the AMA, now celebrating its hundredth birthday.

"One hundred years of racial bigotry and fatuous pretense. One hundred years of gross disinterest in a large section of the American people whose medical voice it purports to be. One hundred years with no progress to report regarding the problem of Negroes which it raised in 1870. A sorry record.

"The American speciaty boards accept a man on the basis of merit. The American College of Surgeons recently erased the infamous policy of discrimination, and has made a man's ethical and surgical standards the sole measuring rod. The International Colleges open their doors to men of like training and interests regardless of race or nationality. But not the great AMA.

"If a small minority of county or state chapters persist in wagging the whole body, and the body as a whole makes no move to direct its own destiny, then it must be considered a body without true strength and purpose or one which likes the way it is going.

"The American Medical Asn. should not start its second century with unfinished business of this kind, making mockery of its continuous protestations of leadership in medicine under the great and free American way of life."

By Albert Deutsch

Dr. Fishbein's Sleazy Excuse For the Medical Color Bar

Two weeks before the President's Committee on Civil Rights rendered its stirring report blasting (among other flaws) the widespread racial discrimination prevailing in the Nation's capital, Dr. Edward L. Bortz, president of the American Medical Assn., addressed the District of Columbia Medical Society in Washington.

Deutsch

"Medicine," he said, "should play a leading part in directing the destinies of the social order."

If Dr. Bortz meant organized medicine, as represented by the AMA and its local affiliate, he could not have made his declaration at a more unfortunate place. For it was here, in Washington, that the District Medical Society in 1869 barred qualified Negro doctors from membership. And it was at its annual meeting held in Washington in 1870 that the American Medical Assn. voted sanction to the local color bar and resolved not to accept into its ranks Negro doctors denied admission to the local society because of their race. The story of that action, too long to relate here, marks one of the sordidly undemocratic chapters of AMA history. (For an inkling of the AMA's present-day hemming and hawing on the subject, read Dr. Morris Fishbein's account of that scandalous incident in his *History of the AMA*, published last year—an account so clouded in slick double-talk that I challenge any reader to make sense of it.)

Noted Negro Surgeon Can't Join AMA

Yesterday I discussed a letter addressed to Dr. Fishbein by the internationally known pioneer in blood-plasma banks, Dr. Charles R. Drew, head of the surgery department at Howard University Medical School in Washington.

The letter excoriated the AMA, on its 100th anniversary, for continuing the policy of barring Negro doctors in Washington and the South because they are denied admission to their local medical societies solely on account of their color.

Dr. Drew, whose high professional qualifications have won him a fellowship in the American College of Surgeons—which recently broke its ban on colored doctors—is still barred from AMA membership because of the color ban in the capital's medical society.

To Dr. Drew's letter, Dr. Fishbein replied:

"You realize, of course, that Negro physicians may now attain membership in the AMA but that, according to our by-laws, it is necessary that membership be secured through entrance into a county medical society to determine its own membership. *There is no other way in which membership in the AMA can be secured by anyone.*"

Nailing Dr. Fishbein's Pious Claptrap

That statement is pure hogwash. Dr. Fishbein knows as well as anyone that there are other ways of attaining AMA membership than admission to a county society. By a special dispensation, the AMA has for years allowed doctors in the Army, Navy and U. S. Public Health Service to join the AMA directly without county society membership. Only last year, the AMA's by-laws were again amended to allow doctors in the Veterans Administration to enjoy the same privilege. The special provisions resulted from the fact that these doctors are often ineligible to join local societies because of residence and other requirements.

It would be a simple task, if the AMA were so minded, to make the same dispensation for Negro direct membership by amending the by-laws. The

Pushed vigorously by the powerful bloc of New York delegates, toward the erasure of a long-standing medical disgrace.

American Nurses Assn., faced with the very same problem two years ago—the inability of Negro nurses in Washington and the South to attain national membership because of local color bars—provided for direct ANA membership for the affected nurses. Nothing prevents the AMA from taking the same step—nothing but its own ingrained prejudice.

It's about time enough AMA delegates with a sense of ordinary American fair play got together to eradicate the ugly blot.

The New York County Medical Society—largest affiliate of the AMA—adopted a resolution at its last meeting, Oct. 25, calling upon the AMA to establish an extra type of membership "available on application to physicians who, for reasons of race, creed, color or sex, have been denied admission to their local county medical society."

This resolution, according to President Harold B. Davidson, will be placed before the AMA through the State Medical Society. It should be

21b 1947

HUTCHINS ASKS TIME

21b October
New Republic
New York, N.Y.
12-15-47 Ltr.

CHICAGO (NR correspondent)

Plea. Dr. Robert M. Hutchins, chancellor of the University of Chicago, admits there is "substantial accuracy" in student charges that the university's Billings Hospital discriminates against Negroes (the *NR*, December 8). But, in an interview with a student committee representing 13 campus organizations, he has ruled out drastic corrective action in favor of a policy of "peaceful persuasion."

Hutchins' plea not to rock the boat ("Look how long it took me to get rid of football") has had little effect on the students, however. They plan to step up their protest campaign with walkouts from classes, and meetings.

Jimcrow Infects Hospital

FIRED NURSE REVEALS PERSECUTION BY OFFICIALS

By John Hudson Jones

How she was persecuted for two years at Woman's Hospital was described in the Daily Worker yesterday by a Negro nurse, Mrs. Matilda Hall of 200 W. 136 St. She is now waiting a reply from the State Commission on Discrimination on a complaint filed with it, in February after her discharge in January.

Mrs. Hall, a handsome woman with silver streaks in her hair, was employed by the hospital at 149 W. 109 St. in July, 1944 and assigned to the Gynocological Clinic.

She was first insulted by Mrs. Edna M. Witham, Director of Nurses in April, 1945, she said.

She had invited the hospital's Social Service workers to Sunday services at Abyssinia Baptist Church. Several had dinner at her home afterward, toured the Harlem Hospital and the YW and YMCA's.

Three days later she was called into Mrs. Witham's office.

"She told me, Mrs. Hall related, 'that I resent your having those people to dinner at your house. After all the best class of white people don't associate with Negroes.'"

Several months later, a Miss Hausman was made clinic supervisor.

"She would call staff meetings and refuse to include me. She constantly insulted me, and treated the Negro patients like dogs."

NOT TOLD

Several days before Christmas, Miss Hausman called a staff meeting to arrange shopping times. Miss Hall was not told about the meeting and was ordered to leave when she entered the meeting room.

Later Miss Hausman came into the clinic and in the presnce of patients told her there was one day left, Dec. 23. She could "take it or leave it."

On Dec. 23, however, Miss Hausman informed her the Nurses Office had changed her working time and that she would have to stay until 2 p.m. When she complained, she was told to "leave the hospital, if you don't like it."

The next day, Mrs. M. Connery, secretary to Mrs. Witham, told her the Nurses Office had not changed her time, and that they had not called Miss Hausman at all the previous day.

'GETS' HER

Infuriated, Mrs. Hall said, "She told me, 'I'll see to it that you get out of this clinic.'"

On Dec. 27, she received a letter from Mrs. Witham asking her to resign as of Jan. 10, 1947.

The letter stated there has been "complaints" from her "fellow workers."

Mrs. Hall refused to resign but had no alternative but to leave.

COMPLAINS

Advised by the National Association for the Advancement of Colored People to complain to the State Commission Against Discrimination. She did so Feb. 2. There she was told by a white interviewer, she could not file charges, that in his opinion there had been no discrimination. Commissioner Elmer Carter, a Negro, reversed this decision, and instructed her to file.

She has since heard from Commissioner E. W. Edwards that the hospital was a charitable institution not subject to the State Commission Against Discrimination.

Backing Mrs. Hall are the People's Committee, the Harlem Pharmaceutical Association and Councilman Benjamin J. Davis. She has been out of work since December and at present is doing missionary nursing throughout the city.

Refuse to Rehire Nurse Who Charges Jimcrow

By John Hudson Jones

The Woman's Hospital has flatly refused to rehire a discharged Negro nurse, Mrs. Matilda Hall, who charged discrimination, and the State Commission Against Discrimination has refused to intervene.

As previously reported in the Daily Worker, Mrs. Hall was discharged Jan. 1, after a series of incidents involving Director of Nurses Edna Witham and Gynecological Clinic Supervisor Barbara Hausman. A letter from Miss Witham on Dec. 27, 1946, accused her of being "over-friendly with doctors and patients . . . becoming more resentful of criticism . . . a disturbing element in our clinic." Mrs. Hall filed charges with SCAD Feb 3.

Mr. Hall, prominent in Abyssinian Baptish Church affairs, brought her case to the attention of the National Negro Congress. The Manhattan NNC organized a delegation to see hospital officials last Friday.

DENY CHARGE

They included Audley Moore, Manhattan NNC director; William Ferman, manager of the Harlem Labor Union; the Rev. McKinley Jenkins; Miss Pearl Cotton, Bessye Bearden Achievement Club; Mrs. Harriet Emptage and Mrs. Hall.

At this meeting, Dr. Klicka and Misses Hausman and Witham again denied Mrs. Hall's discharge was due to bias.

An SCAD letter of March 19, to Mrs. Hall from Commissioner Edward W. Edwards, declared that hospital was a charitable institution, hence not subject to SCAD ruling. However, he stated, "the evidence does not establish that Mrs. Hall's services were dispensed with because of her color or ancestry." The case were "hereby closed."

Mrs. Hall said yesterday she was continuing her fight "not to be reinstated, but to clear my name of the slander in Mrs. Wotham's letter and also that of Dr. Klicka." She has taken her case to the Harlem Lawyers Association. Mrs. Moore announced NNC intention to further act on Mrs. Hall's behalf.

VA Hospitals Need Nurses But Keep Lid On Negroes

WASHINGTON—(ANP) — The need for nurses by the Veterans administration has reached a crucial point, but not crucial enough to force wider use of Negro nurses.

There are colored nurses in only six of the more than 100 Veterans' Administration hospitals. Negro nurses are at Kecoughtan and Roanoke, Va.; Tuskegee; Waco, Tex.; Fort Bayard, New Mexico, and the Bronx Hospital in New York.

Although VA says, "In conformity with the established policy of the Veterans Administration, there is no discrimination based on race, color or creed in the employment of nurses for the department of medicine and surgery" it leaves the path clear for discriminatory practices. Discrimination and segregation are rampant in VA hospitals.

Leave Loopholes

"Professional and physical qualifications, personnel needs ceilings, acceptability by the patients, the community and the immediate staff to which assignment is to be made are the governing factors in the application of this policy," says VA.

"Where there are no housing facilities available, all VA nurses, regardless of race, color or creed, are required to live off station. Separate buildings are provided at some VA hospitals for Negro nurses. At the Bronx Hospital in New York City, Negro nurses live in the nurses' quarters. Services of Negro nurses are not confined to caring for Negro patients, except where their care of white patients would be objectionable to the patients and, or, the community.

Half Hospitals In South

Fully half of the existing VA hospitals are in the South and many more are planned for erection within the next five years. Rhode Island at present is the only state in the Union without a VA hospital.

In the VA hospitals where Negro nurses are accepted, with the exception of Tuskegee, which has an all-colored staff, their ratio to the total number of nurses employed is small. Most of those entering VA hospitals now have had previous experience and held commissions in the army nursing corps.

Nurses Fight Afro-American Status Bars

NEW YORK—Southern branhes of the American Nurses' Association are taking steps to remove discriminatory barriers against colored nurses, Miss Alma Vessells, executive secretary of the National Association of Colored Graduate Nurses, 1790 Broadway, said last Tuesday.

Miss Vessells estimated that more than 4,500 colored nurses in the South have been denied professional status because they could not obtain membership in the American Nurses Association. Prior to 1942, she said, exclusion of colored nurses was a uniform practice throughout the South.

Policy Reversed

The Kentucky State Association of Registered Nurses, one of eighteen A. N. A. constituents which formerly excluded colored nurses, has notified Miss Vessells that its convention voted this month to reverse its policy.

The Florida association took the lead in 1942 and was followed by Delaware, Maryland and Tennessee. In Missouri, District 2, embracing St. Louis, has taken similar action.

South Still Stubborn

Colored nurses are still excluded by A. N. A. constituents in Alabama, Arkansas, the District of Columbia, Georgia, Kansas, Louisiana, North Carolina, South Carolina, Oklahoma, Texas and Virginia, said Miss Vessells.

She said that the changing attitude in the South is the result of a resolution adopted by the House of Delegates of the A. N. A. at its convention in Atlantic City on September 27, 1946.

21c 1947

Alabama

Msgr. Sheen Flays Bias On Mobile Hospital Site

Chicago Defender, Chicago, Ill. 21c

Sat. 5-3-47

MOBILE, Ala. — The Rt. Rev. Msgr. Fulton J. Sheen, speaking here Sunday in connection with the breaking of ground ceremonies for the new $400,000 Blessed Martin de Porres General Hospital, warned his audience that the nation's unity is threatened by preachers of hate.

Five thousand people present heard the nationally known writer and orator who speaks over the radio on the Catholic Hour program plead for "love God and love our neighbor" Christian tenents in American life.

Catholic dignitaries, including Msgr. Sheen, the Most Rev. T. J. Toolen, D. D. Bishop of Mobile, and others, participated in the ceremonies.

The Sacred Heart Order was represented by Brother Albertinus, Superior Brother, of Lyons, France.

During the program, movie actor Pat O'Brien made a five-minute nationwide broadcast from Hollywood asking financial support for the Blessed Martin de Porres Hospital and other Catholic-sponsored projects for the betterment of humanity. Sat. 5-3-47

Msgr. Sheen said:

"In building the Blessed Martin de Porres Hospital for colored here in Mobile, one of our motives is to undo hate with a message of love."

A $10,000 contribution for the mercy institution from Mrs. Clare Booth Luce, former Congresswoman and wife of the publisher of Life magazine, was acknowledged.

Other speakers on the program included Lancelot Chachere, Dr. T. Belsaw, Dr. E. B. Goode, Mrs. Carolyn Tyler, R.N.; a colored priest and former overseas army officer, the Rev. John W. Boman, S.V.D.; Mother M. Veronica, sisters of Mercy; State Senator Joseph H. Langan, Alex Herman, Mayor Robert C. Herndon, Alex Hermun, Bishop Toolen, Msgr. Cullen and the Rev. Vincent D. Warren, S.S.J., director of hospitals.

Jesse Owens, former Olympic star, visiting in Mobile, was a platform guest. Sat. 5-3-47

The hospital will occupy an entire square and have 100 beds. It will be located at the old Eureka Garden site, which was lately Choctaw Park for whites.

21c 1947

Alabama

Negro Hospital Begun In Mobile

Montgomery Advertiser

Mon 4-28-47

MOBILE, ALA., April 27.—(AP)—Ground was broken here today for a $400,000 general hospital for Negroes. Montgomery Ala

The institution to be known as the Blessed Martin de Porres Hospital for Negroes is a project of the Mobile Catholic diocese and will serve as a training school for Negro nurses throughout the south.

The hospital will absorb one of the south's first Negro maternity homes which the diocese established here more than five years ago. Advertiser

Featuring today's ceremonies were a stirring appeal by Msgr. Fulton J. Sheen, nationally known Catholic speaker, and a parade in which state, city and county officials took part along with bands and white and Negro civic organizations.

Bishop T. J. Toolen, of Mobile, said conversion of the present maternity home into a general hospital for Negroes would be a step toward relieving one of the greatest needs for improvement of health conditions among Negroes in the south.

Break Ground For Hospital In Hot Springs

Chicago Defender 21c
Chicago Sat.,
2-20-47

HOT SPRINGS, Ark.—(ANP)—Ground was broken here last week in preparation for a new hospital for aged and infirm Negroes. The hospital site is a hill in the east section overlooking the city and is included in a block in the boulevard addition that Negroes donated to the city.

The ceremony was attended by officials of the Negro Women's Federated Clubs, the Negro Civic League, city and county officials, and a large number of other white citizens.

County Judge Q. Byrum Hurst declared that "an official who does not have the interests of Negroes at heart is not qualified to hold office." He pointed out further that Negroes in Hot Springs own property valued at more than $1,500,000, and that they have an excellent record as law-abiding citizens.

Moreover, there is virtually no delinquency among colored children of the city, he said.

Hospitals liberalizing policies toward minorities, says survey

Los Angeles Tribune

21c Calif Los Angeles, Calif.

Responses to a survey indicating a gradual liberalization of the policies of private hospitals toward patients, doctors, nurses and attendants of the three hard-pressed minorities, Negro, Mexican and Oriental, were reported this week by the Los Angeles County Committee on Human Relations.

Under direction of assistant executive secretary Dale Gardner, the committee conducted a "Survey of Medical Care Facilities for Minority Groups", and received replies to its questionnaire from 84 out of 139 institutions. Replying were 57 general hospitals, 11 maternity hospitals, 12 tuberculosis sanatoria, and four rest homes and sanatoria. Sat. 1-11-47

"Some institutions indicated that they formerly segregated Negroes because they were afraid of possible complaints from prejudiced patients", the report said. "On changing their policy to granting whatever service was available to whatever patients could afford it, they discovered there were very few protests, that sick people were more interested in the quality of the nursing care than in the pigmentation of the skin of the patient in the next bed".

Hospitals replying to the questionnaire answered all or parts of it. Institutions were mainly private, due to the fact that little statistical information of the type wanted is kept in the records of public institutions, where segregation or racial casting is not a policy, although it may be practiced. Secondly, the committee said, "most of the institutions are so large that no one person could make a scientific estimate in answering the questions without a special survey within the institution".

Nineteen hospitals out of the 84 reported inter-racial staffs. Of the 19, 9 are large institutions with over 100 beds; 11 are approved by the American Medical association for training interns. Sat. 1-11-47

Thirty-three Negro, Mexican, and Oriental doctors, filling over 37 staff positions, bring patients to the 19 hospitals, the survey showed. Of the 33, 18 are Negroes, six Mexicans, and 13 Orientals. Less than one-third of the 33 doctors are members of the Los Angeles County Medical association.

The survey reported 31 institutions with wards open to Negroes, 48 with wards open to Mexicans, and 39 which do not discriminate against Orientals. In contrast, 31 institutions said they segregate Negroes, 10 Mexicans, and 17 Orientals.

While 49 hospitals replied that semi-private rooms are available to patients of the minority group, three said only "if the other patient doesn't object". Eleven do not allow the practice at all. Fourteen hospitals failed to answer that particular question.

In 9 institutions, 17 Negroes were occupying private rooms at the time the questionnaire was received.

"There are few, if any, interns and medical students of minority groups in hospitals in Los Angeles county", the survey said; "the exceptions being public facilities such as Los Angeles county general hospital".

Fifteen private institutions were reported as having members of minority groups on their nursing staffs, the survey showed. Fifteen Negroes worked in 7 institutions, 18 Mexicans in 9; and 19 Orientals in 7. Public institutions employ "an indeterminate number of nurses from minority groups".

Out of 9 hospitals known to have schools of nursing, one had two Negro students; two had two and three Orientals, respectively; one had a Mexican. Sat. 1-11-47

Thirty-seven Negro attendants work in 10 different institutions; 46 Mexicans in 18; and 7 Orientals in five. The number of minority group attendants: orderlies, cooks, janitors, etc., employed by public institutions, runs well up in the hundreds.

Concluding the summary, the surveyors said:

"One administrator protested there seemed to be a dearth of tolerant nurses who would care for all sick people, and recommended that legislation be passed which would prohibit discrimination in medical services to minority groups.

"Another factor which leads to segregation is the myth that the members of minority groups are 'happier with their own people'. The truth is that 'their own people' are Americans and they want the same quality of service given to any other".

HOSPITALS FOUND SCREENING RACES

New York Times

21c Calif

San Francisco Group Reports Minorities Bear a Heavier Burden of Ill Health

By LAWRENCE E. DAVIES

Special to THE NEW YORK TIMES.

SAN FRANCISCO, Nov. 30—Racial minority families bear a disproportionately heavy share of the burden of ill health found among residents of San Francisco's "slum and blighted districts," the Council for Civic Unity announced today after a survey of nearly a year by its health committee.

The report, made public by Daniel E. Koshland, president of the group, asserted that the greater number of minority families "are forced to live in these areas by low-income status or the operation of race restrictive residential covenants in other neighborhoods of the city." 12-1-47

The committee, headed by Mrs. Robert McWilliams, found that "a large majority of our private hospitals segregate racial minority patients" and that most of the city's Negro physicians have no accredited hospital facilities at their disposal for the care of patients. This means, the report stated, that when their patients require hospitalization they must be turned over to white doctors who have hospital privileges. Mandue

"The practice of segregation by race or color greatly impedes the use of available hospital beds, thus impairing the efficiency of the institutions," it continued. "Such segregation also imposes an unfair burden on the minority patients who are denied use of ward facilities, average rates for which are 30 to 60 per cent lower than private room rates. In this connection, it should be noted that those hospitals not practicing segregation experience no difficulty whatsoever."

Of physicians who responded to a special council poll 92 per cent said they believed that "qualified physicians of all groups should have access to the facilities of one or more accredited hospitals."

The survey showed that two-thirds of the Negro patients were in public hospitals but that most patients of Chinese ancestry received care in the Chinese hospital. Two hospitals, one public and one private, cared for the delivery of 79 per cent of the Negro babies born during the last year.

"Negro students seem to have the greatest difficulty in obtaining medical training," the report said. "School counselors report that they refer Negroes to schools away from the bay area because of the difficulty in obtaining admission here. Yet a majority of doctors responding to our poll state that there should be more doctors and nurses from each minority group."

Mrs. McWilliams said there was widespread agreement among people working on health matters "that whatever measures may be taken to improve the general health level, progress will be seriously limited if the desperate housing situation continues."

The committee estimated that the "deficit" in housing supply in the bay area was expanding at the rate of about 35,000 family units a year.

Hospitals' Plight Bad Despite Aid

16 in Carolinas Helped but Still Need Beds

CHARLOTTE, N.C. (ANP)—Sixteen of the 10 colored hospitals in the Carolinas received assistance from the Duke Endowment fund during 1946, but the number of beds per 1,000 colored showed no gain over the previous year, according to the 15th annual year book issued by trustees here last month.

Eleven of the assisted hospitals are in North Carolina and five in South Carolina. The total colored general hospital beds in both states aggregated 2,922 and provided 1.6 beds per 1,000 persons.

North Carolina had 1,765 beds or a ratio of 1.8 per 1,000 against 1,157 of 1.4 in South Carolina.

2,057 Beds in Mixed Hospitals

Total number of beds offered by all 18 hospitals amount to 865. An additional 2,057 beds were provided in 104 hospitals which accepted patients of both races.

A total of 187,828 days of care were furnished by the fund in North Carolina. Of this number 52,473 of 27.9% were free days. In South Carolina, 33,999 days of care were provided, with 12,363 or 36.4% representing free days.

The Informer Houston Texas
21c Clinics Sat. 6-7-47

Houston—Exterior view of the new $52,000 BEAL BROTHERS CLINIC, which will open its doors June 15. The recently completed structure is located on Lyons avenue at Yates street. Sat. 6-7-47 —Photo by Dotson

Beal Clinic, Scheduled To Open June 15, One Of South's Best

21c Clinics The Informer Houston, Texas

By a Staff Correspondent

HOUSTON. — The Beal clinic scheduled to open Sunday, June 15, is one of the best built and planned private clinics anywhere in the South without regard to color. Not only is preparation and equipment best for all types of treatment, arrangements are made for extensive research in connection with analysis and disagnosis with ample rooms, with especially designed recesses, cabinets, cupboards, etc.

At the beginning one notices glass brick and other ornamentation on approaching. One enters a large reception room across the whole front of the building. To the right is the ladies lounge, on the left is the men's lounge, and in the center is the main door entrance to the lab proper. To the left of the entrance of the reception room to the hall of the lab proper is the receptionist and clerk's office, again ornamented and lighted with glass brick and all of the more modern panel glass for leaving space for communication to patients. Immediately benind this reception booth, which would extend into what would be the hall, there are two doctors' offices on either side of the hall. Sat. 6-7-47

Then there are four treatment rooms, two on each side, equipped with every facility for treating the various patients that may come. Also there is an emergency, or temporary operating room equipped with all of the facilities including means for the purposes of wash-up, special spotlights and special glass to filter sunlight. Then there is the X-ray room in which there is a large X-ray camera, with a horizontal slab upon which fractures may be viewed also any study of the bones may be made through a fluroscope. In this connection there is a four-panel opaque glass against which the X-ray pictures may be placed and viewed clearly. Then there is a fever treatment room, a physiotherapy room, a lab technician's room, an active nurse's office or room, a supply room and a subsidiary waiting room. 21c Clinics

Extreme back, downstairs, is a drive way, with a double-door garage, and an apron which leads into ramp, beginning at the door and running inside, on a slant on which stretchers may be taken with patients. Back of the garage is a compartment for a large heating and cooling unit combined. The two Doctors Beal, who were escorting me through the plant, turned on the power and by the time we had walked through to the front the building was cool, though it had not been opened or used at all before we got there.

Before leaving downstairs, one might say that the rooms are well built with special cabinets and arrangements, the result of the experience, observation and reading of the Beals, who have been planning this clinic for a number of years. One will casually say "I designed this myself," or another will say, "I had this put in because of having learned from experience that it is useful," etc.

About the time I was exhausted they opened the door and we went upstairs. We entered a large room upstairs, which the Beals proudly informed me would be their library, their conference room in which they would discuss with doctors of the city various medical problems, and will carry all the books they will need for research and study. Sat. 6-7-47

Then one crosses a very short hall to another large room, which will be a sort of rest room for the doctors themselves, so that they may at any time of the day ralax when they need it. Immediately across the hall from this room is a shower and toilet.

West, in the short hall, one enters a small kitchenette which will be used for preparing meals for patients who may find it necessary to stay all day for treatment, and for any snack that the doctors may need from time to time. No plans are made for overnight patients, but the doctors contemplate that some patients may need to stay a whole day for treament from time to time, and this kitchen will furnish the food.

Coming back to the library, the doctors opened a door that leads out on top of a roof, now covered with tar and gravel, with sides extending about 18 inches above the roof and around it. The doctors contemplate swarding that and having grass and other arrangements out there, so that it can be used for social events of various kinds.

In fine, the clinic is of tremendous size, with a great number of facilities and rooms for treatment, and it evidently has cost a great deal of planning and of money. It is distinctly a very worthwhile addition to the medical and hospital facilities of Negroes in Houston.

HOUSTON CLINIC CALLED BEST IN ENTIRE S'WEST

21c Atlanta, Ga. Daily World

By JOHN H. THOMPSON

HOUSTON—(ANP)— One of the finest medical and surgical clinics in the country and by far the southwest is the Beal Brothers Medical and Surgical clinic located here in the heart of the fifth ward with its teeming 20,000 Negroes. Sat. 6-28-47

Built and equipped at a cost of $100,000, it has been called a "miniature Mayo Brothers clinic" by doctors and physicians who have seen the place. Incorporating some features and medical machinery which doctors in these parts seldom if ever use, health authorities in Houston call it the best equipped clinic in the city.

Containing 22 rooms, including a reception rom build of glass bricks, it is 28 x 116 feet, 1½ stories high and has a strong foundation upon which additional stories may be erected if needed.

SURGERY ROOM

Among rooms it has a minor surgery room, two private rooms for the brothers who operate the place, a fever inducing room, metabolism and x-ray and flouroscopic room, a clinical laboratory with a registered pathologist in charge, a dispensary with a registered pharmacist in charge, and a large consultation room. The second floor is occupied by a large sun-deck upon which patients may absorb the health giving rays of the sunshine.

There is a secretary and clerk on duty at all hours. Others on the staff include a registered nurse, two nurses' aids, a laboratory and x-ray technician and a full-time maintenanec man. The staff will be augmented from time to time as occasions warrant it.

No hospital cases are taken and patients requiring hospitalization are sent direct to the hospitals throughou the city. Sat. 6-28-47

On the day of formal opening hundreds of lay persons and scores of doctors tured the plant marveled at its up-to-date appointments, were interested in the medical equipment, some of which no other doctor in this city of 500,000 population had ever had.

21c 1947

D. C.

Bar at Gallinger Blasted in Survey

Social Agencies' Study Also Blames Community

WASHINGTON

A Hospital Survey Committee of the Council of Social Agencies, after making a six-month study of Hospital Care in the District of Columbia ending in March, 1946, took cognizance of the fact the colored physicians were barred from Gallinger Hospital.

The report stated:

"Howard University . has not teaching privileges at Gallinger Hospital . . . where 70% of the patients are colored persons. Howard graduates comprise more than half of all of the colored physicians, who have won recognition as diplomats of the official specialty boards.

"Yet, in its own city it is deprived of the potential advantages to its students which would accrue from a teacher affiliation with this public hospital.

Communtiy Blamed in Part

"The colored medical profession of Washington questions not only the justice of this, but the judgment of a community which would withhold opportunities for better training from a group of physicians whose ministrations to a neglected race could be made so much more effective if the privilege were granted.

"It seems appropriate that Howard's faculty should be permitted to teach its students in Gallinger's wards.

"The Health Department which controls this hospital, the Commissioners who administer the government of the District of Columbia and the Congress thus have before them a problem which could be easily solved if they should choose to act logically and on broad principles."

Mrs. Roosevelt Praises Congress

Afro-American 21c Baltimore, Md. D.C.

Aid to Freedmen's Hospital Valuable

Sat-4-12-47

WASHINGTON—(NNPA)—Mrs. Eleanor Roosevelt, a trustee of Howard University, last Thursday praised Congress for its generosity to Freedmen's Hospital and for tying in the hospital with the university's Medical School for training of doctors.

After attending a meeting of the board of trustees April 8, Mrs. Roosevelt wrote in her syndicated column "My Day" as follows:

"Congress has realized, despite its program of economy, that Freedmen's Hospital in Washington is one of the very important centers for the improvement of the health of the colored people.

"There are so few places where colored doctors can get adequate training that it is very important that those which do exist should give the best possible opportunity, since there is a great shortage of such doctors in the country.

2-15-47 Sat.

"Tying more closely together the Howard Medical School and Freedmen's Hospital makes it increasingly possible to give good graduate training, and I am deeply grateful for the foresight shown by Congress in this matter."

Hospital's Contaminated Food Shows Poor Administration

afro-American 21c D.C. 2-15-47 Sat. Baltimore, Md.

By CHARLES H. HOUSTON

As hard as food is to get, the shocking disclosure that more than a ton and a half of food had to be condemned at Freedmen's Hospital, Washington, because it had become contaminated by rats, points out once again the unsatisfactory administrative conditions at the hospital.

Every one in the community knows that conditions at Freedmen's are below standards. Some of the doctors will frankly admit that the food is often bad, the service inferior and sanitary conditions not the best.

But nobody will make a public attack lest it reflect discredit on one of our best known institutions and furnish prejudiced persons with an argument that colored persons cannot run a first class hospital.

False Pride

It is time we lost some of our false race pride and stopped tolerating incompetence just because it is black. Pointing out that conditions at Freedmen's are bad does not prove that colored persons cannot run first class hospitals; it merely proves that some are not fit to run hospitals. As far as that goes, some colored persons are not fit to be present at their own funerals; neither are some whites. 2-15-47 Sat.

The responsibility for the unsatisfactory conditions at Freedmen's Hospital lies with our doctors. They have failed to demand that their patients receive the best.

We laymen look to our doctors for protection in medical affairs, yet our Washington doctors continue to send their patients to Freedmen's in the face of present conditions without a public protest.

No Chance to Compare

This brings up another vital weakness in the position of our physicians. They fail to see how segregation is cutting off their professional growth. How can they know whether conditions at Freedmen's are below standard if they never visit or work in any other hospital?

Some of our physicians do not pay a professional visit to any hospital besides Freedmen's from one year to another. Freedmen's may look big to them, but in the world of medicine it is just an obscure hospital.

What these physicians need is to throw off the fetters of segregation, get into other hospitals and see for themselves how first class hospitals are run.

Open Gallinger

In this connection many of us laymen have long been trying to get the Washington physicians to make a real fight to open up Gallinger Municipal Hospital to colored physicians and internes.

Seventy per cent of the patients at Gallinger are colored, but a colored physician cannot treat a patient there. 2-15-47 Sat.

Colored physicians went to court in Knoxville, Tenn., to win their right to serve in the Knoxville city hospital. But our Washington doctors talk, resolve and wind up the next day back at Freedmen's.

Suppose every law suit to which a colored person was a party had to be tried in a segregated court. Our physicians would be the first ones to protest this discrimination. What we laymen are trying to get them to see is that it is just as bad to make them do all their practising in one hospital.

In the meantime, something must be done about conditions at Freedmen's Hospital, and done quickly. We cannot wait for the doctors to take the lead. Freedmen's is under the Federal Security Agency.

Write the administrator and ask for an investigation of Freedmen's Hospital from top to bottom. If things are right, nobody need be afraid. If they are wrong, they should be exposed and the public given some protection.

Tallahassee has new Negro hospital

TALLAHASSEE, Fla.—The Laura Bell Memorial hospital and Campbell clinic is a new 35-bed hospital for Negroes, founded and built by Dr. Alpha O. Campbell, prominent Negro of the city.

NEGRO HOSPITALS EXPAND

21c Times Leader

Specialists Will Assist Staffs of Three in the South

New York, N.Y.

NASHVILLE, Tenn., Sept. 27 (AP)—Patients in three of the largest Negro hospitals in the South soon will be served by specialists of their own race flown by private plane from Nashville.

Sun. 9-28

The Meharry Medical College, needing additional bed space for teaching Negro internes, got in touch with hospitals in Louisville and Mound Bayou, Miss., and Tuskegee Institute for a total of 200 beds which are to be used for teaching purposes. Dr. Murray Brown, education director at Meharry College, said that the flights by Negro specialists were part of the program of instruction for Negro medical students.

"It simply happens to be a fact the teaching personnel for medical colleges is dreadfully short everywhere in the country now," he said. "It also is a fact that most Negro hospitals are dreadfully short of the high type of professional staff that a good teaching institution affords."

Sun. 9-28-47

Sixteen of the 18 Negro hospitals in North and South Carolina received assistance from the Duke Endowment Fund during 1946, but the number of beds per 1,000 Negroes showed no gain over the previous year, according to the 15th annual yearbook issued by trustees of the fund.

21c

Eleven of the hospitals are in North Carolina and five in South Carolina. Total Negro general hospital beds in both states aggregated 2,922 and provided 1.6 beds per 1,000 Negroes.

Birmingham

Sixteen States Get Aid For New Buildings

Journal & Guide 21c Norfolk, Va.

Sat 11-15-47

Federal Act Makes Provisions For Five-Year Period

By JAMES L. HICKS

WASHINGTON, D. C.—(NNPA)—The Federal Security Agency has approved 16 state hospital construction plans, calling for the expenditure of $29,000,000 as part of the $1,125,000,000 program authorized over a five-year period under the Hill-Burton Hospital Construction Act.

Journal & Guide

Of the 16 state plans so far approved, that of North Carolina was the only one failing to carry a stipulation that colored people would not be denied admission to the proposed hospitals.

This disclosure was made last Friday by officials of the Federal Security Agency when they announced approval of the first application for a federal grant-in-aid for building a hospital under the hospital survey and construction program.

Norfolk, Va.

APPLICATION SIGNED

The application of the Chattahoochee Valley Hospital, to be located at Langdale, Chambers county, Ala., was signed last Wednesday morning by Surgeon General Thomas Parran of the United States Public Health Service in the presence of Oscar Ewing, federal security administrator.

The project, an 82-bed general hospital and health center, sponsored by the Chattahoochee Valley Hospital Society, a voluntary non-profit organization, will conform to the Alabama plan, which provides that "no person in the area will be denied admission to the proposed facility as a patient because of his race, creed or color."

The plan, however, made it clear that colored patients will be segregated in the proposed hospital. The plans called for facilities to accommodate 14 colored patients, including a separate obstetrical suite and a separate labor room for maternity cases.

FSA REQUIREMENTS

The FSA disclosed that its construction application form for hospitals to be built under the Hill-Burton Act requires a state to indicate whether colored persons will be admitted to the proposed facilities.

FSA officials were unable to explain why the state of North Carolina would not include in its plan a commitment to admit colored persons to hospitals to be built under the Hill-Burton Act. Nor did they indicate whether federal funds would be withheld from the state of North Carolina in the absence of a commitment to admit colored persons to such hospitals.

The Hill-Burton Act contains an anti-discrimination clause but permits segregation of patients on the basis of race or color.

The 16 states, to which allocations of federal funds have been made are:

Sat 11-15-47

AMOUNTS ALLOTTED

Alabama, $2,887,725; Colorado, $657,150; Florida, $1,461,365; Idaho, $293,400; Illinois, $2,770,725; Indiana, $1,727,625; Kentucky, $2,589,000; Mississippi, $2,402,300; New Mexico, $457,425; North Carolina, $3,431,550; North Dakota, $308,325; Oklahoma, $1,640,175; Tennessee, $2,637,000; Texas, $4,840,125; Utah, $365,100; Washington, $512,100. The total federal funds authorized is $29,018,100.

The Hill-Burton law, passed by the 79th Congress is especially intended to assist rural and small town areas in their hospital needs. It authorizes grants up to $3,000,000 to assist states in surveying their needs for health facilities and in drawing up long range plans for construction to meet those needs. It also authorizes grants totaling $75,000,000 a year for five years to assist the states.

Under the law each dollar of federal funds must be matched by two dollars from state funds or local sources. The FSA said 25 states have completed development of their plans, 16 have been approved, and others are nearing completion.

Georgia (Colored Catholic Clinic)

Work Of Colored Catholic Clinic Highly Beneficial

Daily World Atlanta, Ga. Jues 2-25-47

By V. W. Hodges

It is more than a mere possibility it's a great danger that our colored citizens will overlook or completely ignore the courageous struggle which the Colored Catholic Clinic of Atlanta is making against the ravages of disease and ill-health among our colored people.

An institution, which in the first two months of 1944, treated over 400 patients; another 5,132 in 1945 and a total of 8,442 in its out-patient department in 1946, together with performing 250 operations, a third of which were major operations, constitutes but part of the amazing story behind the Colored Catholic Clinic, about which so little is known and much less heard.

The story of the extent and scope of its work is so fascinating and the dire need for its continued operations so great that it becomes worth our while to record the more salient features here in briefest outline.

The Colored Catholic Clinic is located at 348 Forrest Avenue. The Clinic was originally founded in 1941 by a group of lay women under the direction of a Bishop, who summoned a small number of physicians to organize the work.

Since then, progress has been rapid and forceful. In June, 1945, a small four-bed ward was set up and surgey started. During 1946 a total of 250 operations were performed a third of which were major ones. Improvements during that year included the addition of a special Urology clinic and another Medical Clinic to meet the growing demands upon the service which previously had been handled in one day's service.

Services Told

As variety increased, so did the problems, which made imperative the need for a Social Service Department. Happily, through the efforts and continued interest of Mrs. H. S. Cochrane, Chairman of the Case Work department of Atlanta University, Social Work was organized there in September, 1946, and two graduate students sent to use this agency as field work. The amazing results of this experiment were recorded in a paper, written by Mrs. Cochrane:

"Social workers" she said, "have seldom had a better opportunity to apply their knowledge and skills to a variety of social situations than is possible in a clinical unit for medical treatment. Traditionally, social workers have used their skills in social service department in hospitals and in-patient and clinical services in a hospital frame.

Jues. 2-25-47

"The Catholic Colored Clinic undertakes to offer medical information, counsel and referrals to those patients who have questions or difficulties in the course of working out medical plans. The agency program is flexible. It can add new services or discontinue those which are no longer required, depending upon the shifts in patients requests.

You get a real glimpse of the great heart in the Clinic when it is explained that notwithstanding the mounting costs in every line during the past three or more years, the Clinic renders free care. There is a nominal charge of 25 cents for any medication that might be order en. In service fees for surgery are placed on an individual basis. As there is no endowment of any kind for this institution., it is obliged to make its cost. Therefore, the patients who must undergo major operations are charged an average of $50 each, some more, some less. Minor operations are proportionately less. 21c Ga. (Colored)

Needs Explained

The Clinic expresses an urgent need for services for the unmarried Negro mother requiring delivery and nursing care combined with shelter after confinement for herself and her baby and for more substantial assistance for recipients of public welfare. Daily World Atlanta, Ga.

We hope to tell you more about these services. Meanwhile, a Sponsors Committee, headed by Mrs. Grace T. Hamilton, has been organized. Jues, 2-25-47

Augusta, Ga., Herald
May 25, 1947

Augusta Negro Elks Club Gives $1,000 for Aidmore

(21c Iza.

The Augusta Aidmore hospital campaign fund is expected to be considerably swelled at the second report meeting which is to be held Monday at 6:15 p. m. at the Richmond Hotel.

At Thursday's first report meeting of the general canvass a total of $70,574—nearly half of the $150,000 goal was reported.

The Augusta Aidmore, sponsored by the Crippled Children's League of Georgia, will have equal facilities for white and Negro children. The hospital capacity will be 50 beds, of which 25 will be for white and 25 for Negro children.

The Negro division of the Augusta Aidmore launched its own campaign Thursday night. The Garden City Lodge 537 of Negro Elks contributed $1,000 as an initial gift. In addition to which individual members of the lodge pledged $1,000 more for the campaign.

Exhalted Ruler George L. Scott appointed the following as Captains to conduct the Aidmore Drive: L. P. Bohler, chairman; Hornsby Drayton, Alvin Williams, James Sapp, Lewis Glover, P. N. Morrison, Robert Rucker, Rev. Dutchie, I. E. Eubanks, L. P. Wallace, H. W. Bowman, I. E. Washington, W. J. Hamp and Alfred Wells.

This committee is asked to meet Wednesday at 8:30 p. m. at the Elks Lodge to formulate plans to make contracts with Negro churches, business and organizations in an effort to secure funds for this drive. An invitation is extended any volunteer workers, to meet with this body.

The first Sunday in June is designated "Aidmore Day" in all Negro churches of the city, and all offerings will be used for the crippled children's hospital fund.

Columbus, Ga. Ledger
August 20, 1947

Negroes Give $216 To Phenix Hospital

(21c Iza)

Three Negro organizations have contributed $216 to Phenix City's $400,000 memorial hospital, which opened Monday.

Phenix City commission accepted a check from the Colored civic club Tuesday, which represented the three groups.

The Liberty Hill Baptist church contributed $51; the Frederick Douglas Tenant's council, $103 and the Colored Civic club, $62.

The Atlanta World Daily
Pub. Atlanta Ga.

60 Ga. Counties Have No Access To Public Hospitals

(21c
Sun. 7-27-47

BY MARION E. JACKSON

Although the State of Georgia has been alotted $2,978,000 in Federal funds for construction of hospitals under the Hill-Burton Act, the prospects of general increase in public-owned hospitals remained gloomy and obscure for Negroes.

Georgia with 159 counties has 60 counties with no general hospital beds. About one-sixth of the population of the state or about 400,000 persons, a large percentage of them Negroes have virtually no access to public medical service and facilities.

In 65 counties the only facilities are in two private-owned; profit-type hospitals. Some 900,000 persons live in these 65 counties, and have avaliable about 1,600 beds, less than the number received. No statistics are avaliable as to what percentage of theese facilities are open to Negroes, but whatever percentage available is belived to be very low.

Thirty-four counties have public or non-profit hospitals with a total of 5,369 beds. In addition there are 722 beds in proprietary hospitals in these counties, making a total of 6,091 beds available.

In the last classification there are 3.8 beds for every thousand residents, total unsatisfactory for white persons but at a disastorious low for Negroes.

In the 60 counties without hospitals there is an interest in obtaining hospitals in 28 of the 60. of these 28 counties, 12 have established hospital authorities which could issue revenue certificates to aid in the construction of the hospitals.

Only nine out of a total of 65 counties have any money for matching federal funds. The legislature failed to appropriate any money for matching federal funds the amount needed to match federal funds must come from private sources. Since the state has 159 ill-financed counties with low per captia income, it can be assumes these counties will do little or virtually nonthing for the Sun. 7-27-47

However, every county desiring a haspital will not be approved for Federal funds even if money is available locally unless the survey shows that a hospital would be situated to serve the area properly.

It is estimated that Georgia needs 6,000 general hospital beds in addition to the present, 7,500. Since race plays a great importance in determining actual needs some percentage should be definitely allotted to Negroes.

Only these states, Pennsylvannia North Carolina and Texas, received a larger portion of the 75,000,000 dollars than Georgia.

Race Delegates Attend American Hospital Confab

St. Louis, Pa. 21c

10-4-47

ST. LOUIS—More than a dozen Negro hospital administrators were in attendance at the forty-ninth annual convention of the American Hospital Association held at Kiel Auditorium here last week.

Among those present were Dr. E. Stanley Grannum, supt., Whittaker Hospital, Newport News, Va.; Charles E. Burbridge, supt., Freedmen's Hospital, Washington, D. C.; James Lewis, supt., Burrell Memorial Hospital, Roanoke, Va.; John L. Procope, supt., Provident Hospital, Baltimore, Md.; Eugene Bradley, supt., Kate Biddings Hospital, Winston-Salem, N. C.; William N. Rich, supt., Lincoln Hospital, Durham, N. C.; W. T. Mason, supt., Norfolk Community Hospital, Norfolk, Va.; S. Tanner Stafford, supt., Flint-Goodridge Hospital, New Orleans, La.; Virgil McKnight, supt., Homer Phillips Hospital, St. Louis, and Elmer V. Mosee, supt., People's Hospital, St. Louis.

10-4-47

Grannum, Rich, Burbridge Lewis, Procope and Stafford are members of the American College of Hospital Administrators.

Illinois

21c 1947

21c/Ill.

FORMER CHIEF dietitian at Meharry Medical College, Nashville, Miss Dolores F. Moore has been appointed dietitian on the staff at Winfield Hospital for Chest Diseases in Winfield, Ill. Miss Moore is the daughter of Walter Moore and the late Mrs. Leanna Shaw Moore of 6219 South Parkway.

Name Giles To County Hospital

Chicago Defender
Chicago, Ill. 21c Ill.

Noted Specialist Resident Surgeon

Sat-8-16-47

Dr. Roscoe C. Giles, noted Chicago surgeon, was admitted to the Cook County Hospital this week and assigned to active duty on the surgical staff. The Cook County Hospital, one of the oldest and most famous municipal institutions of its kind, is also one of the largest in the world.

In the many years of efficient service it has rendered the public it has numbered among its surgeons such brilliant masters as Nicholas Senn, Christian Fenger, and John B. Murphy. In the early '90s, Dr. A. M. Curtis and Dr. Daniel Hale Williams, noted Negro surgeons, served on its staff.

Dr. Giles is a product of the public school system of New York State. He holds the degree of Bachelor of Arts from Cornell University, Ithaca, N. Y., and a MD degree from the Cornell College of Medicine, New York City. He has been an attending surgeon to Provident Hospital for a number of years. In 1938 he was admitted by examination as a diplomat of the American Board of Surgery and in 1945 as a fellow of the American College of Surgeons. He is also a fellow of the International College of Surgeons.

During the years 1930-1931 Dr. Giles was a Julius Rosenwald fellow in surgery to the University of Vienna in Austria where he resided with his family for one and a half years.

Sat-8-16-47

He has taken post graduate work at Columbia University, University of Chicago, and the Cook County Post Graduate School of Medicine.

In addition to holding membership in the Chicago Medical Society and the American Medical Association, Dr. Giles is also an ex-president of the John A. Andrews Clinical Society of Tuskegee, Ala., and an ex-president of the National Medical Association.

He was chairman of the Liaison Committee of the latter organization. This committee was responsible for securing the appointment of Negro physicians on Selective Service and Appeal Boards throughout the country during the war and for the integration of Negro physicians into the armed forces in responsible positions.

In World War II, Dr. Giles served as a lieutenant colonel in the Medical Corps, Army of the United States and as chief of the surgical service in the Station 1 Regional Hospital located at Fort Huachuca, Arizona.

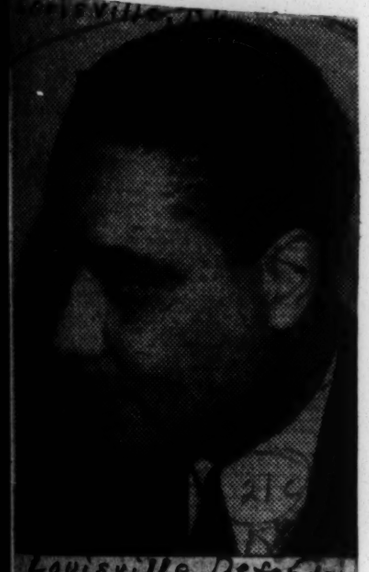
After being placed on inactive duty status he joined the Officers' Reserve Corps and was appointed as an expert consultant to the Secretary of War through the surgeon general.

Sat-8-16-47

Dr. Giles' appointment to the staff of the Cook County Hospital was endorsed by County Commissioner Edward M. Sneed and approved by the president of the Board of County Commissioners, Mr. Erickson.

21c 1947

Kentucky



Louisville Defender

HOUSTON A. BAKER, superintendent of Red Cross hospital has been awarded a fellowship by the Genera Education Board of New York City, for a year's study in Hospital Administration at Northwestern university. Baker, who has been at Red Cross hospital three years will begin study in September. Sept. 6-21-47

The Currier Journal
Louisville, Ky. 21c Ky.

The Negro Health Program

I am under instruction to express appreciation for the Committee of Fifteen and the hundreds of members of their respective churches to Mayor E. Leland Taylor and Paul Downard and the Board of Aldermen for their fair consideration in providing funds for the health program for Negro people through the Red Cross Hospital. We regretted much that our Mayor did not see fit to recommend the $25,000 in the budget, but thanks to God, others did. The added bridge fund gift will meet a decided need. Our committee believes in the good of heart, even in these turbulent days, which belief is strengthened by the good turn on the part of our public officials. These views are shared by the Jefferson County Sunday-School Association and its 40 affiliated churches.

DANIEL J. HUGHLETT.

Louisville. Wed - 7-9-47

Good Samaritan Opens New Negro Ward

Courier Journal 21c
Louisville Ky.

Lexington, Ky., Oct. 11 (AP)—Walter Phelps, superintendent of Good Samaritan Hospital, said today a 12-patient Negro ward had been opened and that accommodations for 18 patients would be opened about November 1. The hospital started a $90,000 remodeling program two years ago and has opened two wards.

21c 1947

Louisiana

Baltimore, Md.

MISS FLORENCE M. HARGETT

Miss Hargett Gets Flint-Goodridge Post

Afro-American
21c La.

NEW ORLEANS—Miss Florence M. Hargett, who returned to the United States in July from her post as a nursing consultant with UNRRA in China, assumed her new position as director of the nursing service of Flint-Goodridge Hospital here on Sept. 1.

Sat. 7-6-47

A native of New York, Miss Hargett received her nursing education at Mercy Hospital, Philadelphia, and did post-graduate work at Cook County Hospital, Chicago, and the Margaret Hague Maternity Center in Jersey City.

Held High Posts in 4 Hospitals

She was later granted the B.S. degree in nursing administration from Columbia University.

She has been night head nurse in the Premature Station, Cook County Hospital, Chicago, and obstetrical supervisor at both Homer Phillips Hospital in St. Louis and the Margaret Hague Center.

She spent two years as director of nurses at St. Agnes Hospital Raleigh, N.C., prior to her 19 months of work in China.

State Hospital Protested

Editor of The Times-Dispatch:

It is only natural, in this life of ours filled with its daily bits of drama so close to us and overshadowed too often by storm clouds of world events threatening the very roof of our "heartbreak house," that small news items on an inner page should pass unnoticed, or if read, leave no impression at all. 2|c mental

This then is to call attention to the tragedy of Elko.

The State Hospital Board is determined to place its new institution for Negro feeble-minded at Elko. All protests, petitions, and appeals to our Governor and other authorities notwithstanding.

To understand why this act is a tragedy to Elko and its many citizens you should know briefly the history of its past 30 years. During and after the first World War families of Scandinavian descent, mostly Danish, moved into Elko and vicinity. They came from Wisconsin, Illinois, Iowa, Nebraska, and other States. On their arrival they found a sparsely settled country, the main roads at times impassable clay ruts. It was pioneering in the true sense for these "first settlers." Sun. 2-8-47

In the ensuing years, through persistent petitionings, roads have been built, mail delivery started, power and telephone lines erected.

Take a spin in your car over White Oak Road, Elko Road and side roads. You will now see scores of well-kept homes, many of these home sites hewn out of wood and brushland. You will see a community of wide-awake American citizens with their own community house and recreation grounds. These homes represent the toil and sweat and the life savings of these loyal citizens. They built this community from the ground up. Is it not a tragedy that they should have forced upon them this asylum? 21c Richmond, Va.

Understand, please, that there is heartfelt sympathy for these unfortunate Negroes mentally sick, but why ruin and block the growth of a thriving white community when there, no doubt, are thousands of acres in other parts of the State where the asylum can be built with damage to no one.

Sandston. B. BOE.

Lafargue Clinic Approved by VA

Afro-American 21c

Baltimore, Md. Mental

Sat. 2-8-47

To Give Psychiatric Service to All Vets

NEW YORK — The Lafargue Clinic, a volunteer organization providing mental hygiene services virtually free in Harlem, has been designated by the Veterans' Administration as an official agency for the psychiatric treatment of all veterans.

It is understood that the State Department of Social Welfare is now considering issuing a license for the clinic which, prior to VA's recognition in contracting for its services, had no official standing.

Without Discrimination

Established last March, Lafargue Clinic is located in the parish house of St. Philip Church and serves all applicants, regardless of race, creed, or color. Patients pay 25 cents per visit if they can afford it. Sat. 3-8-47

The clinic's board of directors, of which Richard Wright and the Rev. Shelton Hale Bishop are members, hailed VA's action as a gesture by the Federal Government against discrimination in the treatment of veterans.

By Albert Deutsch

Line Between Insanity and Crime Is Thinly Drawn in Georgia

MEMO: To the State Legislature of Georgia.

I trust that current dispute over the Governorship of your State will not unduly delay urgently-needed consideration of the heart-breaking plight of your mentally ill neighbors in Georgia. PM of December 29 carried a 2½ page story on Gerogia's State Hospital for the Insane at Milledgeville—largest in the world, in terms of patient population—based on my visit to the institution in company with State Welfare Director A. J. Hartley, together with official records, patriotic surveys and personal interviews with mental health experts. I am submitting herewith an analysis of the broader mental health needs of Georgia, with specific proposals for meeting them. As I noted in my report on Milledgeville, there is no intent to slur the "benighted South"; what I found in Georgia is unfortunately paralleled in nearly every part of this country. There is a desperate need, nation-wide, to take account of our callous neglect of the mentally sick. Upon the state legislatures devolves the main duty of erasing the shame.

The shameful conditions at Georgia's single state hospital for the mentally sick, at Milledgeville, represent but one aspect of an appalling neglect of mental health in the entire state. Professor Ralph E. Wager of Emory University, president of the Atlanta Mental Hygiene Assn., described as "scandalous" the fact that there's not a single psychopathic ward in any of Georgia's general hospitals, not even in Atlanta's growing medical center. Hence, people who become mentally sick can be sent only to Milledgeville or to a county jail. Many mental patients still languish in jails awaiting commitment to Milledgeville. No patient can be voluntarily admitted to the state hospital; he or she must, in each instance, go through a humiliating court procedure leading to legal commitment—very much as if insanity were akin to crime. Mental patients are still transported to Milledgeville by police officers instead of by trained attendants.

Deutsch

The unfair operation of the Jim Crow policy in the Milledgeville state hospital, outrageously evident in the physical quarters for white and colored patients (flouting the "equal but separate" Jim Crow law segregating whites and Negroes in public institutions) is reflected in the latest annual report, not yet published. The report, drawn up by Dr. Y. H. Yarbrough, superintendent, tells how daily clinics were held over a six-months period "for the purpose of interviewing every *white* patient to determine whether or not they have shown sufficient mental improvement to be released from the hospital."

Nothing is said about interviews with the Negro patients for the same purpose. The report also notes that "all wooden beds throughout the white department were replaced by metal beds, and this was also done in the new colored building." Colored patients in the old buildings still sleep in wooden beds, when they don't have to lie on mattresses thrown on the bare floors.

The Milledgeville State Hospital is under the direct supervision of the Georgia State Welfare Dept. Judge A. J. Hartley, State Welfare Director, is a well-meaning man with generally progressive ideas, but he is a lawyer who frankly admits he knows nothing of medical or psychiatric problems. I got the impression, too, that he tends to think too much in terms of new buildings, too little in terms of active medical treatment for the patients housed in them.

What Georgia needs badly is a separate mental hygiene department, or at least an independent psychiatric division within the existing welfare agency. This department or division should be headed by a trained psychiatrist, or else a well-oriented physician. Morale in the Milledgeville staff, lay and professional, is very low due to the ever-present threat of political interference in hiring and firing, insecure tenure, lack of civil service ratings, long hours, substandard pay, lack of incentives, etc. The Georgia CIO complains of unfair administrative blocks in its efforts to organize attendants at Milledgeville.

At the time Gov. Ellis Arnall took office in 1943, political interference at Milledgeville State Hospital had become so scandalous that the medical staff sent a stiffly-worded petition to the new governor protesting against the lack of medical independence and pleading for reform. They declared that Supt. Yarbrough's hands had been tied by "politics, in its most detestable form, which is rampant here." The situation has improved somewhat since then, but not nearly enough.

NEXT: A Program for Reforming Georgia's Backward Mental Hygiene System.

By Albert Deutsch

What Georgia Can Do to Reform Its Mental Hospital System

MEMO: To the Georgia State Legislature (continued):

The appalling backwardness of the Georgia State Hospital for the Insane at Milledgeville is illustrated by the gruesome fact that the pathologist, whose job should be to conduct research and perform autopsies, spent his whole time until recently embalming patients who died—there were 790 deaths in the year ending last June—because there was no refrigerator in the morgue and bodies had to be embalmed quickly to keep them from spoiling! A modern morgue, together with an up-to-date pathological laboratory, is now nearing completion. This development was speeded up by a protest of Georgia undertakers to the State Licensing Board.

Social workers, it is now universally recognized, form a vital part of a modern hospital's functions. They are needed for obtaining the socio-economic backgrounds of patients that provide clues to their mental conditions and for helping rehabilitate discharged patients in the community. At least 15 social workers would be required to give minimum service to Milledgeville's nearly 9000 patients. The institution actually has but one, and she is now on leave of absence getting needed training at a social work school in Nashville!

Deutsch

Shocked at Conditions

Eminent psychiatric authorities, during the past generation, have inspected Milledgeville, expressed shock at conditions there, and made recommendations for reform. For the most part, these have been blithely ignored. At the end of the Talmadge regime, back in 1937, conditions had fallen to such subhuman levels that the chairman of the State Welfare Board, Arthur Lucas, made public one of the most biting indictments ever made of a state institution. Local newspapers in Atlanta and other Georgia towns have from time to time vainly carried scathing editorials about conditions at Milledgeville.

Welfare Director Hartley, who has succeeded in tearing down some of the worst firetraps and erecting some modern, well-equipped buildings, hopes that the State Legislature will be persuaded to authorize erection of at least two new mental hospitals in Georgia—one in or near Atlanta—to relieve the insufferable overcrowding and deterioration at Milledgeville. The State Constitution prohibits borrowing or floating state bond issues. Hartley has a plan for setting up a state-sponsored corporation that could issue bonds for $7,000,000 needed as a minimum for new hospitals.

Psychopathic wards, where people with temporary mental ailments might get emergency treatment, should be set up in as many general hospitals as possible, especially in Atlanta, where their complete absence is nothing short of scandalous.

Procedures Need Overhauling

The present procedures which [illegible] are [illegible]

mental patients like criminals, should be overhauled. No mental patient should be locked up in a jail, even temporarily. Patients should be transported to Milledgeville by trained attendants, not by police officers. The present judicial system of determining insanity for commitment should be modified; patients should be admitted to the state hospital at their own request instead of being forced to undergo humiliating court procedures.

¶ A state mental hygiene division or department should be created. The treatment of mental disease should be considered primarily a medical, not a charity, problem.

Georgia, like most other American states, needs a new deal for its mentally sick. It shares a [illegible] general [illegible] of the States.

nishing state-aided local treatment centers for psychiatric cases.

The opening of three wards in the new Kings County Psychiatric Pavilion has had no effect on the overcrowded conditions at Bellevue Psychiatric Hospital, which remains a Bedlam. Brooklyn's women patients are still transported to the jam-packed wards at Bellevue.

NEXT: A Case for the State Anti-Bias Commission: Lily-White State Psychiatric Institute in New York Refuses to Admit Negro Patients.

By Albert Deutsch

Mental Cases 'Observed,' Not Treated, in City 'Psycho' Hospitals

If a hospital is a place where sick people get *treated*, then New York City's two municipal psychiatric centers are grossly misnamed. It may come as a shock to most New Yorkers to learn that neither Bellevue Psychiatric Hospital nor Kings County Psychiatric Hospital is intended for the treatment of mental patients. They were set up, and principally used, to observe, diagnose and distribute people who become mentally ill in New York.

Deutsch

Amazing as it sounds, actual treatment in these places, in the rare instances where it is afforded, is *bootlegged* by the doctors, given surreptitiously. New York City, believe it or not, provides no official public hospital treatment for the mentally sick. Those who can't afford private hospital treatment can get it only in a state mental hospital.

For many years experts have been urging the city to provide active treatment for mental patients admitted to Bellevue and Kings County, and to extend psychiatric facilities in other municipal hospitals. The city, chronically harassed by financial problems, has never put these recommendations into effect.

Three compelling reasons are advanced for this essential step:

¶ Many people who are sent to the city's psychopathic wards and then shunted on to state mental hospitals could have their "nervous breakdowns" cleared up and sent home in a matter of days or weeks *if* prompt and competent psychiatric treatment were available. If, instead of merely maintaining "clearing houses" for mental patients at Kings County and Bellevue, the city could set up active treatment centers there and elsewhere for acute cases, a great deal of time and expense could be saved.

¶ The grave overcrowding, averaging over 20 per cent, in New York State mental hospitals would be appreciably relieved if acute treatment centers could be set up in local areas.

¶ At Bellevue and Kings County, mental patients have to undergo a long series of diagnostic tests as well as psychiatric observation. Those who are transferred to state institutions usually have to go through the same procedure again. Much time and expense is entailed in these duplicated procedures. The patient's records developed in the city hospitals are, curiously enough, not sent on to the state hospital, along with the patient.

¶ The process of legal commitment which a patient usually has to undergo when he is transferred from a city psychopathic ward to a state hospital involves much humiliation and tension for both the patient and his family. Prompt treatment leading to early recovery could avoid this process, in many cases.

It is futile to expect New York City, in its present financial plight, to undergo the full expense of converting its psychiatric observation centers to full treatment hospitals for acute cases. The main beneficiary of this change would be the State, which saves commitment and maintenance expenses for the patients sent home directly from the city wards. The State, then, which for nearly sixty years has accepted the policy that "the mentally ill are the wards of the state," should underwrite the new setup.

A bill introduced in the New York State Legislature Wednesday by Sen. Seymour Halpern (R., Queens) would, if passed, go a long way toward accomplishing this important end. It provides for creating a State Commission to survey existing city and county psychiatric facilities with the ultimate aim of extending state aid to local psychiatric treatment centers. I have only one objection to this bill: the need is so acute that state aid should be granted at once.

New York City, which has the greatest concentration of psychiatric talent—badly organized from the viewpoint of public service—lags far behind other localities in providing active hospital treatment for mental patients. Neighboring Westchester County has for years been operating, on a limited scale, active psychiatric treatment wards at Grasslands Hospital. As Senator Halpern observes, even the limited resources at Grasslands has saved 20 per cent of its psychiatric patients from commitment to state hospitals.

In a later column I shall describe what other states, far ahead of New York, are doing in fur-

By Albert Deutsch

State Psychiatric Institute Here Bars Negro Patients and Doctors

Physician, heal thyself!

Psychiatrists are supposed to be experts in human relations. That's their main business, to probe into unhealthy emotional conflicts within and between individuals and to help straighten out those conflicts. The psychiatrists, above all other people, should be alive to the evil impact of Jim Crow, or racial segregation, on the human personality, individual and collective.

Deutsch

Dr. Nolan D. C. Lewis is the director of the New York State Psychiatric Institute and Hospital. The Institute rises majestically as a slender skyscraper high above the Hudson River on the westernmost end of the modernistic cluster of giant buildings known as the Columbia-Presbyterian Medical Center on West 168th Street in Manhattan. It is operated by the State Dept. of Mental Hygiene as the main research and training center for the State mental hospital system. It is affiliated with nearby Columbia University's College of Physicians and Surgeons, where Dr. Lewis is professor of psychiatry.

The State Psychiatric Institute has a bed capacity for about 200 mental patients, who are selected on the basis of their suitability for research projects conducted there. Patients pay what they can. It is considered a very lucky break for a patient to get admitted there, since he or she is assured of topnotch treatment under near-luxury conditions by an excellent staff of psychiatrists and other trained personnel. Dr. Lewis's post is a coveted one in the field of psychiatric research.

The other day I found myself sitting next to Dr. Lewis in the parlor car of a train bound for Washington. I took occasion to interview the well-known psychiatrist on a number of subjects, including his observations on Goering, Hess, Streicher and other Nazi leaders whom he examined along with other Allied psychiatrists prior to the war crime trials at Nuremberg. Dr. Lewis said he found nothing about the Nazis that would have any special significance for Americans.

When the discussion turned to the current activities at the State Psychiatric Institute, I recalled that I had never seen a Negro patient on the wards there, nor a Negro member of the professional staff. Many Harlem doctors had expressed deep resentment following repeated failures to get a Negro psychiatric patient into the Institute.

Dr. Lewis, a heavy-set, pink-faced, mustached man of 57, candidly stated that no Negro patient had ever been admitted to the Institute, to his knowledge.

"We don't take in Negroes," he said. "We are primarily a research set-up, not a treatment center in the ordinary sense. Negro patients don't fit into our projects. It's not because we discriminate against the Negro race. We exclude Chinese, Malay and other diverse racial types."

"But, doctor, this is New York, not the deep South. Whites and Negroes live together in this town. They work side by side, and are mixed in the wards of our City hospitals and our State mental hospitals. Jim Crow is officially frowned upon. Shouldn't your research setting be patterned upon the non-segregated setting of New York community life?"

"Efficient research," Dr. Lewis answered, "requires uniformity in group studies. We don't complicate the problem by introducing the biological or racial factor."

Later, in Washington and New York, I queried a number of top-ranking psychiatric research men on their reaction to this statement. Nearly every one of them flatly disagreed with Dr. Lewis's thesis, though none would be quoted by name for fear of getting tangled up in a personal row.

"It would seem to me that the exclusion of Negro mental patients in a New York psychiatric research center is, indeed, unnatural, since it does violence to the prevailing and accepted practice of the general community," one prominent research man declared.

"Have you ever had a Negro on your medical or other professional staff," I asked Dr. Lewis.

"No," he replied. "The white doctors wouldn't stand for it."

"Have you ever polled them on the question?"

"No, but I've talked to many of them about it, informally. They wouldn't come out definitely against excluding Negroes from the staff, but I feel sure they'd be against them."

This reporter knows at least six doctors on the Psychiatric Institute staff who would welcome a Negro colleague, if qualified in other respects. I know none who wouldn't tolerate a Negro staff member.

"Dr. Lewis," I said, "Your institution is State-supported and State-operated. The Constitution of this State specifically prohibits discrimination against persons because of race in public places. The State Commission Against Discrimination was set up to stamp out racial bias in employment practices. I am sure you are not consciously discriminating against Negroes, but it seems to me that the policy of your institution in effect is discriminatory. And yours is a State institution. How do you square your policy with avowed State principles?"

"I have received some protests from Negro groups on that score," Dr. Lewis replied. "The trouble lies mainly with the people making the disturbance about this issue. Prejudice is deep-rooted in man. It has an animal basis. The only way to get rid of it is by education, and that's going to take a long, long time."

"Don't you think it's the role of psychiatrists to take leadership, as experts in human problems, in efforts to root out prejudice rather than to perpetuate it by virtual sanction in practice?"

"I've been telling the disturbing elements bringing up this issue at the Institute: 'Fight your battle outside this hospital. This is a place for sick people.'"

"Don't you mean for sick people, except Negroes and other dark-skinned races?"

"I wouldn't put it that way," Dr. Lewis said.

Dr. Lewis insists that he himself harbors no racial prejudice. I respect the good doctor's judgments in other matters, but his strange rationalizations for the exclusion of Negro patients and staff members reflect a kind of thinking unattuned to the progressive ideals of New York State. The racial exclusion practiced at the New York State Psychiatric Institute would be deplorable in a private hospital; it is intolerable, if not illegal, in a State institution.

This is a matter for Governor Thomas Dewey to act on directly. It certainly merits the immediate attention of the Mayor's Committee on Unity and even more urgently that of the State Commission Against Discrimination.

NEXT: How Mental Patients Get the Runaround or Brush-Off at New York City's Mental Hygiene Clinics.

Fewer Mental Clinics Mean More Patients in Mental Hospitals

By Albert Deutsch

Prevention is the keynote of modern mental hygiene. It is better and cheaper to prevent a mental breakdown, or nip it in the bud, than to keep building bigger hospitals for extended care. There are, of course, broad social, economic and political factors in the causation of mental ills that no locality can correct by itself. But this City, the most abundant of any in available—but poorly distributed psychiatric personnel, can:

Deutsch

¶Expand its psychiatric services for school children through the Education Board's Child Guidance Bureau.

¶Extend similar services in agencies dealing with juvenile delinquents, whose anti-social behavior often results from emotional upsets.

¶Provide psychiatrists and specially-trained nurses in the City Health Dept., especially in the Child Hygiene Bureau, in connection with its well-

Marriage Clinics Could Prevent Family Break-Ups

¶The City Hospitals Dept. should expand at once its inexcusably inadequate mental hygiene clinics, offering more attractive financial and pro-

fessional inducements for needed psychiatric personnel. PM, New York, N.Y.

¶ Local health and social agencies which have sadly neglected this vital area of need should plan in a co-ordinated manner, possibly through the Welfare Council of New York City, to extend mental health facilities to their clinics.

¶ There is a crying need for research in this field, aimed at tracing causes, prevention and cure. New York City, which is on its way to becoming the world's greatest medical center, should take the lead in promoting psychiatric research.

¶ The city needs a lot more marriage counselling agencies—*with proper standards*—to help straighten out family problems that so often arise from, and in turn create, serious mental unbalance.

¶ Since there is an urgent need for more psychiatric personnel—psychiatrists, psychologists and specially-trained nurses and social workers—more training opportunities for these professionals should be opened up.

¶ There are still a great many general physicians in this City, as elsewhere, with an appalling lack of knowledge about mental disease. The local medical schools and medical societies have made notable advances in recent years towards filling the gaps in psychiatric education, but lots more has to be done along this line.

¶ Finally, all these things can be speeded up if the general public shows more awareness of the importance of mental health. One obstacle to progress that must be cleared away is the persistent stigma that is still attached, wrongly and unjustly, to mental illness and those who suffer from it.

Later Columns Will Describe Promising Advances in Field

I conclude the present series on New York City's psychiatric problems with the knowledge that I have left untouched many important aspects. From time to time, in future columns, I hope to tell about those agencies and institutions which are really doing a job. PM

PROGRESS REPORT: The New York Society for Clinical Psychiatry, with a membership of 400 psychiatrists, has appointed a committee to look into the Jim Crow situation at the New York State Psychiatric Institute and Hospital—a state-owned institution—which has barred Negro patients from its wards and qualified Negroes from its medical staff, in direct violation of the State's anti-discrimination policy. There seems to be a good chance that the Institute's lily-white policy will be changed. New York, N.Y.

Three Wards Are Still Grossly Understaffed Wed. 2-19-47

The three wards opened in the new Kings County Psychiatric Pavilion—unused for nearly six years—are still operating with a grossly inadequate staff. It appears that Dr. Sam Parker, who has two city jobs—director of Kings County "Psycho" and chief psychiatrist of the New York City Hospitals Dept.—is going off the air, kissing his personalized radio program, *Dr. Parker Presents*, good-by. That may give him more time for the city's critical psychiatric problems.

Bellevue Psychiatric Hospital remains horribly overcrowded. No relief is in sight unless and until the City Hospitals Dept. increases its financial and professional inducements to psychiatric personnel.

NEXT: How Connecticut Saves Money and Salvages Sick Humans By State Aid for Mental Clinics.

Nurses, Dentists, Make Up Percy Jones Hospital

Atlanta, Ga. Daily World
Sat, 7-5-47

18 Nurses On General Duty Assignments

21c

BATTLE CREEK, Michigan.—Twenty Negro commissioned personnel are currently assigned to the staff of the Percy Jones General Hospital, Battle Creek, Michigan, it has been announced.

Among the Negro officers at the Michigan General Hospital are one dentist, one neuro-psychiatric and eighteen general duty nurses.

First Lieutenant Eugene M. Dasent, Chicago, Illinois, is attached to the hospital staff as a dental officer. This is the first duty station to which Lieutenant Dasent has been assigned.

DECKER ASSIGNMENT

Lieutenant Evelyn Decker, Army Nurse Corps, of Washingtonville, New York, is assigned as a neuropsychiatric nurse. She served at Halloran General Hospital before coming to the Percy Jones Hospital. Thirteen of the nurses now at the Michigan hospital served at Halloran General Hospital, New York, before their present assignment. Four were formerly stationed at Fort George Meade, Maryland. Sat. 7-5-47

Following, with home towns, is the roster of Negro officers assigned:

First Lieutenant Eugene M. Dasent, 619 Woodland Park, Chicago, Illinois, dental officer; First Lieutenant Evelyn Decker, Box 56, Washingtonville, New York, neuropsychiatric.

First Lieutenants Bernice K. Amos, 107 Calhoun Ave., Bridgeport, Connecticut; Bernice E. Britton, Route 1, Clover, Virginia; Gladys S. Brown, 141 Mt. Vernon St., Camden, New Jersey; Iradelle M. Conway, 522 Harrison St., Danville, Virginia; Sara J. Farrell, 2008 Claggett St., N. E., Washington, D. C.; May E. Greene, 987 Union Ave., Bronx, New York; Mille S. Hooks, 3815 Pennsylvania Ave., East Chicago, Indiana; Beatrice C. Holmes, 448 Decatur St., Brooklyn, New York; Marrion E. Jackson, Crosswicks, New Jersey; Grace L. Johnson, 2410 Goode Ave., St. Louis, Missouri; Mabel Kirkpatrick, 408 South Broad St., Ridgeport, New Jersey; Louise T. Langhorne, Thornburg, Virginia; Lourene F. Martin, Princess Anne College, Princess Anne, Maryland; Marie Pearce, 51 Somerset St., Newark, New Jersey; Beulah V. Perkins, Rt. 5, Louisa, Virginia; Dorothy M. Richards, 84 Passaic St., Trenton, New Jersey; Matty L. Stone, 11 Elizabeth St., Staten Island, New York, and Jennie Thomas, 107-2 Pinegrove St.

New Adventist Hospital Ready

21c

Afro-American

GRAND RAPIDS, Mich. (ANP) — At the General Conference of Seventh Day Adventists held here recently, two projects sponsored by the group in the South were given considerable attention.

A report on the Riverside Sanitarium and Hospital near Nashville was given by H. D. Dobbins, business manager, who told of completing a new $450,000 hospital building. The institution is six years old and has a most favorable outlook

Balt. Oakwood College

President F. L. Peterson of the Oakwood College, Huntsville, Ala., reported an enrollment of more than 500 students. A new girls dormitory has been completed at a cost of $250,000, as well as a new laundry building costing $47,000, he said. Sat. 11-20-47

E. F. Hackman, president of the Southern Union, and president of the school board, said the school has 1000 acres of rich land with a fine dairy, and that the grounds have recently been beautified by new landscaping and the addition of new roads.

Afro-American

OFFERED POST—Dr. J. Hubert Clark, prominent young physician, has been asked to head the all-colored hospital in Mound Bayou, Mississippi. Dr. Clark has made several trips to discuss the proposition with the hospital board, but would not commit himself as to his final decision. Dr. Clark is the son of the late Dr. S. M. Clark, a graduate of Meharry Medical College, and was resident physician at the school from 1941-43. He is a member of the Omega Fraternity. He married Miss Lois Nabrit. The Clarks have two children.

Baltimore, Md. 21c

Miss. Delta Hospital Fires Chief Surgeon

Sat. 3-8-47

MOUND BAYOU, Miss. — Dr. T. R. Howard, surgeon-in-chief of Taborian Hospital here, has been dismissed by the directors because of disagreement with officials of the Knights of Tabor, oldest and one of the wealthiest societies in the State, which sponsors the institution. Sat. 3-8-47

He has been succeeded by Dr. J. H. Clarke, formerly of Knoxville, one of the most prominent of the younger surgeons developed by Meharry Medical College. The hospital is the pride of the Mississippi Delta.

21c 1947

Missouri

SHORT OF DOCTORS:

Veteran Medic Cites Afro-American Need for Physicians

(21c)(Mo.) Sat. 5-31-47

Baltimore, Md.

PHILADELPHIA

Dr. Samuel P. Stafford, in town Saturday from St. Louis to attend the 50th reunion of the U. of P.'s 1897 medical school class, had an encouraging word for prospective young doctors.

"We're short on doctors," he said, and then added, in an advisory tone:

"We need more and better ones to cope with the health situation. And they should scatter about in the small towns, not concentrate in the big cities, where 9 of 10 usually go."

He explained that he went to St. Louis 48 years ago "because I was looking for a field."

Retired From 3 Hospital Staffs

"Things were different then. We had to go out and make people see the need of colored doctors. Now it is easier for a doctor to pick up a practice because our people have come to trust them."

Now 74 and retired from the staffs of three St. Louis hospitals, he can see how hospitalization for his minority group has improved.

"In St. Louis, colored people received cruel treatment in hospitals" before they were provided institutions of their own, he declared.

It was through his insistence, and that of other interested persons, that the first city-supported hospital, People's, was provided in 1899. It has 100 beds.

Now there are two others, St. Mary's Infirmary with 150 beds and the nationally famous Homer G. Phillips Hospital.

The latter institution, he said, has 700 beds and was built on a bond issue in 1933, although it had previously existed in another building as an annex to the all-white city hospital.

The failure of the Republicans to build the new hospital in 1932 resulted in their being repudiated and ousted at the polls, he said.

"Ground was broken, but the administration never went so far that the proposed building could not be converted to something else. The State Supreme Court finally decided that the bond issue would become void if one item in it were violated."

The hospital, which he said is now worth $3,000,000—"there is no comparison between it and your Mercy or Douglass" — is named after Homer G. Phillips, the lawyer who acted as spokesman for the group pressing for its erection.

Phillips was subsequently murdered, "shot down like a dog by two boys," over another matter, he said sadly. Sat. 5-31-47

Dr. Stafford was one of two colored students in the class of '97, which received the first four-year medical course. The other was the late Dr. Francis J. L. Johnson, of Washington, Pa.

A native of Bethlehem, Pa., Dr. Stafford took his interneship at Freedmen's Hospital in Washington. The interne association of that institution, which was organized about 1910, is his idea, he says proudly.

The association meets June 3, 4, and 5 at the hospital, and Dr. Stafford will be there.

He says he learned about hospital administration from the late Dr. Nathan F. Mossell, '82, founder of the Douglass Hospital, in whose office he worked for a short time.

Although not related to Dr. Mossell, the St. Louis physician is an uncle of Mrs. Sadie T. Alexander, prominent lawyer.

Dr. Stafford has two sons, George, editor of a weekly newspaper in St. Louis, and S. Tanner, superintendent of the Flint-Goodrich Hospital in New Orleans.

Lest We Forget

BY FRANK L. WILLIAMS

St. Louis, Mo. Argus

21c Mo.

Fri. 7-11-47

HOMER G. PHILLIPS HOSPITAL

BY A LARGE number of distinguished people who have observed or visited it, as well as by the home people, this institution is regarded as the most outstanding hospital in the world, built for, and, in the main operated by, Negro people.

The physical plant is unusual and immediately commands attention. It ranks among the very best of the entire country.

It is adequately equipped and there are no shortages in supplies.

It is located in a desirable part of the city. It is easily accessible to all sections of the community. It is in the neighborhood of hard working, thrifty people. It is within seeing distance of Stowe Teachers College, the Sumner High School Poro College, the Malone Orphans' Home and Tandy Park.

This institution is an outcome of the planning of Mayor Henry W. Kiel, when, in 1923, he made a successful effort to improve the city. The city was woefully lacking in traffic adaptations and in public buildings. It belongs to the era, in our municipal history, of the Civil Courts building, the Municipal Auditorium, new eleemosynary buildings, the widening of the streets, improvement in the sewerage system, and an extension of the park and playground services. Among these major improvements in the city, the health service for Negroes occupies no inconspicuous place as symbolized by construction of the Homer G. Phillips Hospital.

When the Honorable Bernard F. Dickmann, on entering his campaign for the mayoralty of the city, inquired: "What do the colored people want?" the answer was quick and clear: "We want the hospital completed." Mr. Dickmann's reply was: "I will do it if I am elected." He was elected and the completion of the hospital was one of the crowning events of his administration.

It was a glad day for St. Louis when her citizens could proudly point to such a noble and worthwhile achievement.

It was well for the hospital that it was located within a city with two medical schools .... Washington and St. Louis Universities. Professors of these institutions were ready to serve as visiting staffs. Fri. 7-11-47

With the appointment of administrators, supervisors and other workers, the doors of the hospital were opened to the satisfaction of the citizens of St. Louis and the Negro people especially. It was a new day in the history of the "Mound City!" A city that is neither north nor south, neither east nor west, but in the heart of the nation.

Almost from the beginning, there have been rumors, complaints and adverse criticism concerning the operation and service at the hospital. Much of this was to be expected. It was a new undertaking with many inexperienced workers. To be sure, there would be mistakes, suspicions and ill-considered judgments. Non-constructive criticism would be to the front. In all likelihood there was some constructive criticism. Attempts have been made to investigate some of these criticisms and to improve the general administration of the hospital.

21c Mo.

It is asserted that politics has encroached upon the authority of the administrators; that the administrators have not acted promptly and with decision; that proper ethical relations have not always persisted between the workers in the institution; that employees have removed food from the building surreptitiously; that wounded patients brought to the building have not received prompt attention; that the food has not always been satisfactory; that the building has not always been kept clean and sanitary; that jealousies and ambitions of workers have interfered with the efficient operations of the institution.

Public servants are due the confidence and respect of the public whom they serve until they have shown that they are not deserving of such confidence and respect. The public should be very sure before adversely criticising public workers. If the public discovers unjust complaints, it should be ready to defend the wrongfully accused persons. Fri. 7-11-47

If, on the other hand, the facts work under them. They and their assistants should be held rigidly to the discharge of their responsibility. There is no reason why the quality of service of a public employee should be of a lower degree than that of a private worker. Employees of local, state or federal government, should measure up to the requirements of competent workers anywhere.

It is believed that the Mayor who is bringing efficient service to other parts of our local government will not overlook any deficiencies that may be found at Homer G. Phillips Hospital. If justify complaints and criticisms, there should be no time lost in dealing with unworthy and inefficient workers.

The Mayor of our city carries full responsibility for efficient service of the employees of our municipal government. He should have the proper media by which he may secure accurate information concerning all city employees. He should hold his assistants responsible for the satisfactory service of those who

21c 1947

New York

Afro-American Baltimore, Md. Sept. 13-47

21c

THEY BOUGHT A HOSPITAL—Discriminated against when treating private patients in New York City hospitals, 64 Harlem physicians have purchased the 7-story, 54-bed X-ray Hospital at 121st St. and Mount Morris Park in Manhattan. Several members of the group are shown with Dr. Cecil Marquez, seated, discussing their new project. They are, left to right, Drs. Reginald O. Morris, Louis T. Wright, Harold Edgehill, Arthur Gray, Robin Bennett and Walter Winter.

N.Y. Medics Plan to Open 2nd Interracial Hospital

21c Afro-American
Baltimore, Md. Sat. 6-14-47

$54,000, 7-Story 54-Bed Harlem Plant to Be Taken Over by Group of 60 Doctors June 14

NEW PORK—The sale of the seven-story building, formerly X-ray Hospital, at 10 Mount Morris Park, West, near 121st St., to a group of 60 Harlem physicians at a price of $54,000 was expected to be closed here Saturday, June 14.

According to Dr. George D. Thorne, 852 St. Nicholas Ave., spokesman for the group, the physicians plan to operate the hospital as New York's second interracial institution.

"Because of discriminatory policies in most private hospitals, we have been forced into this investment in an effort to overcome such practices," the doctor pointed out.

He said the project would not compete with Sydenham Hospital which has operated as an interracial institution for the past three years. The X-ray Hospital has 54 beds.

Difficult Problem

Harlem physicians, it was pointed out, run into difficulties when they try to find semi-private or private hospitalization for patients. They must be a staff member or have courtesy privileges in a given hospital in order to obtain private care for patients.

X-ray Hospital has been inactive for a year. It was bought in 1937 by Dr. Geza Weitzner, surgeon of 900 Park Ave., and his brother, Dr. Imre Weitzner, X-ray specialist. Confirming the sale, the former was in sympathy with the plan for another interracial hospital. Sat. 6-14-47

Have Collected $37,000

Dr. Thorne revealed that invitations were sent to both colored and white physicians in Harlem and Washington Heights to join in the project. Some $37,000 has been collected.

project are Drs. Louis T. Wright, Peter M. Murray, Cyril Dooly, Richard Carey, J. E. Carey, Neville Whiteman, Walter Winter, R. S. Wilkinson, Aubre Maynard, Cecil Marquez, Norman H. Pritchard, John Randolph and R. L. Bennett.

Sydenham To Tackle Community Social Needs

N.Y.C.
June 8, 5, 1947
21c N.Y.

By Gene De Poris

Sydenham, the only interracial voluntary hospital in the country, has taken another pioneering step in modern hospital practice with the opening of an Institute of Community Relations.

The new institute was announced yesterday by Harry C. Oppenheimer, president of the hospital's board of directors. New York, N.Y.

Henceforth, Sydenham Hospital, with its 12-story building at 124th St. and Manhattan Ave., in Harlem, will not only serve the sick but will concern itself with the community's needs as well. The hospital is close to the line of demarkation between Negro and white sections.

Oppenheimer, president of the hospital since it adopted its interracial policy nearly four years ago, said Sydenham must now be thought of as an enlarged institute in which medical and social divisions will assume equal parts.

The new Institute, to be known as the Sydenham Institute of Community Relations, was established in co-operation with the Bureau of Applied Social Research, an operating unit of Columbia University's Department of Sociology.

John A. Morsell, formerly a research associate of the Bureau, has been named director of the expanded program. 21c/AN

He said he hoped the Institute would in time project studies which will be of value in understanding problems of the community itself.

Morsell said the program would be carried on by a social science staff—not doctors. However, he added, his staff's work would naturally be integrated with the medica ldivision of the hospital.

The Institute will be guided by the hospital's Committee on Community Relations, headed by William H. Kilpatrick, professor emeritus of education at Teachers College, Columbia.

Prof. Kilpatrick explained that the Institute would engage in "a systematic study . . . dwelling on where the social problems and the medical problems overlap."

The new Institute was hailed as an important step forward in modern medicine by Dr. Alfred E. Cohn, member emeritus of the Rockefeller Institute for Medical Research and a director of Sydenham Hospital. June 8, D. 47

"The Harlem community," Dr. Cohn said, "is a center in which this kind of enterprise can be particularly and successfully carried out. Here we can be prepared to study all races on equal terms and learn about them not only from their illnesses but from the point of view of those other important matters—the way in which they get on together politically, and from the standpoint of religion, race and economic relations."

70 N. Y. Doctors Will Buy 54-Bed Hospital

Pittsburgh, Pa. Courier

Sat. 6-14-47

NEW YORK—Seventy Harlem physicians have completed plans for purchase of X-Ray Hospital, a fifty-four-bed facility, located at 10 Mount Morris Park West. The seven-story building is being purchased from the Weitzner brothers, former operators, at a reported cost of $54,000. Transactions will be completed Friday of this week.

According to Dr. George D. Thorne, 852 St. Nicholas Avenue, the purchase was necessary because colored physicians are usually denied staff privileges at other hospitals in the city. The newly acquired facility will be operated on an interracial basis, and will not compete with Sydenham Hospital, which has been operated without segregation for the past three years.

RAISED $40,000

X-Ray Hospital was closed last year when the Weitzner brothers acquired the larger facilities of the Lexington Hospital for their work. Announcement of purchase of X-Ray Hospital was made last Friday at a meeting held at the home of Dr. Cecil Marques, 473 West 153rd Street. Sat. 6-14-47

The original meeting, held six weeks ago, was attended by thirty-four physicians who pledged financial aid to the project. On Friday it was announced that the seventy medical men had raised $40,000 in cash toward the purchase price of the hospital and secured another $70,000 in pledges.

Dr. Marques, chairman of the steering committee, told The Courier: "Negro doctors have been systematically excluded from hospitals in the city. This purchase is an effort to overcome that obstacle. With the exception of Sydenham Hospital, Negro patients cannot secure semi-private accommodations and colored physicians are forced to lose control of a case when hospital care is required.

TO OPEN IN FALL

"This has posed a particular problem when a patient is a member of group medicine plans," he continued, "and is entitled to semi-private accommodations by contract. The Negro physician is thus forced to pay for a private room out of his own pocket."

Opening of the new hospital has been set for late fall. Among specialties to be offered on a non-profit basis at the institution are surgery, obstetrics, gynecology and general medicine. At present there exists in Harlem only one other hospital owned by Negroes, Edgecombe Sanitarium, 137th Street and Edgecombe Avenue.

Previously, there had been the Booker T. Washington, first Negro-owned hospital in the city; the Wylie Wilson Sanitarium, and the Vincent Sanitarium, which later became known as the International Hospital. Sat. 6-14-47

PRIVATE CARE POSSIBLE

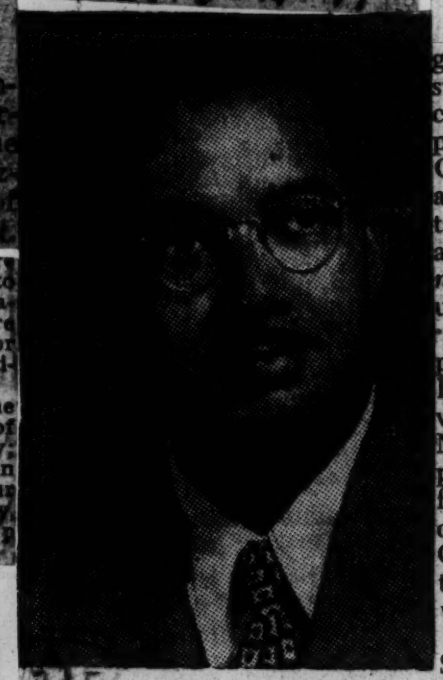
X-Ray Hospital will furnish colored physicians opportunity to secure private or semi-private care for patients. Before, they had to choose between sending their patients to city institutions, where they lose control of their cases, or turning them over to a white physician.

In addition to Dr. Marquez, the steering committee is composed of Doctors Hyacinth Davis, secretary; Walter Winters, treasurer; Robin Bennett, Harold L. Edgehill, Arthur Gray, John C. Lord, Cyril Dolly, Neville Whiteman and Phillip Beach.

Courier Pittsburgh

For Everyone —

Seventy New York doctors in the Harlem area are buying this seven-story, fifty-four-bed hospital for $54,000. They will operate it on an interracial, non-profit basis. Sat. 6-14-47



JOHN ALBERT MORSELL, formerly of Columbia university's bureau of applied social research, who was named as director of the institute of community relations, a new project of Sydenham hospital, New York (ANP)

Daily Worker, Saturday

UNPRECEDENTED — Setting a precedent in neuro-psychiatric circles, Mrs. Boggs Mann of Cincinnati supervises the training unit for phychiatric social work students of all races, from Columbia and Fordham Universities at Columbia-Presbyterian Hospital in New York City.

Negro Doctors Map Bias-Free Hospital

New York, N. Y. P. M.,

By MYRIL AXELROD

As two investigating committees go leisurely about finding an answer to the question, "Does discrimination in hospital staff appointments exit?", a group of the City's Negro doctors, ot whom the answer is painfully obvious, are taking action to help themselves and the Negro patients they serve, *now*. (See Albert Deutsch's column, p. 11.) Man. 9-15-47

One hundred of these Negro physicians, fed up with the private hospital set-up throughout the city which keeps its doors closed to Negro doctors, have bought a hospital building and plan to have its facilities available, before the end of the year, to any doctor in the City—white or Negro—who wants to use them, and any patient—white or Negro who needs care.

The building, located on 121st St., formerly housesd the X-ray Hospital, a private institution owned by white doctors. It was purchased in June by the Negro physicians who charged, at the time, that they were forced into setting up their own hospital because of the policies of local institutions which withhold staff privileges from Negroes and members of other minority groups.

The only action taken by the medical groups in the City since the announcement by the Negro doctors has been the appointment of investigating committees.

Two inquiries are planned—one by the Hospital Council of New York, the other by the State Commission Against Discrimination. But neither agency has, at present, the authority to enforce the recommendations it makes and neither survey has gone beyond planning.

The new hospital, with its limited capacity of 54 beds and its implications of Jim-Crowism, is admittedly no cure-all for the problem of discriminatory appointments. Man. 9-15-47

But the doctors, who are convinced that integration into the white hospital system is, as yet, just a rosy dream, explains:

"We owe it to our community to make available to it *now*, when the need is acute, the very best we can provide in medical care."

Data on Life in Harlem

Baltimore Md.

Research Unit Studies Factors Leading to Bad Health; Tackles Infant Mortality

12-27-47

NEW YORK—Data to be used by experts in determining scientific answers to basic health, social and economic problems in Harlem, is being provided Sydenham Hospital officials by patrons of the out-patient clinic, John A. Morsell, director of the hospital's Institute of Community Relations, has revealed.

Sydenham has embarked on a comprehensive research experiment, currently indicated in a planned investigation of infantile mortality, and envisions an ambitious expansion program covering new buildings and additional services, including laboratories ofr medical and biological undertakings.

Probes Infant Deaths

The Institute of Community Relations, organized last August as a research bureau, will look into the abnormal number of deaths among colored infants in Harlem, often attributed to malnutrition.

Mr. Morsell is of the opinion that research may prove the contention of some physicians that too many expectant mothers wait too long to take advantage of pre-natal care.

Will Analyze Causes

If a substantial number of deaths are traced to malnutrition, the institute hopes to learn if insufficient food or improper diets are responsible.

If the majority of deaths are traced to negligence, the institute will seek to determine if the causes may be attributable to an inadequate number of treatment centers, or to meager information by the patient as to where treatment may be obtained.

The laboratories proposed in the building expansion program would provide new opportunitties for colored chemists, scientists, psychologists, psychiatrists, sociologists, anthropologists and technicians who would work side by side with whites, thus preserving the hospital's interracial character.

Special attention will be paid to unreported diseases and illnesses, their distribution and degree of concentration. Health and housing data will be studied to analyze their bearing on character development and personality.

Sydenham Hospital Files

21C N. Y. Ohio American

Oppenheimer Again Heads Sydenham

Chicago Defender
Chicago, Ill. 2.1c
Sat. 6-31-47

NEW YORK—The board of directors of Sydenham Interracial Hospital here last week re-elected Harry C. Oppenheimer as president, to head again the 25-man board which he has served as top executive since its inception in December, 1943.

In making his annual report to the hospital's directors, Oppenheimer paid tribute to "the members of the medical, nursing, technical and clerical staffs, all of whom have stood by us to further achieve our objective, which slowly but nevertheless surely is becoming the objective of all forward-looking progressive people."

Negro members of the board of director at Sydenham, the nation's first interracial hospital, are: A. A. Austin, realtor; Alan Dingle, attorney; Earl Brown, journalist; James H. Robinson, clergyman; Ferdinand C. Smith, executive secretary, National Maritime Union, and Mrs. Estelle Massey Riddle, nursing consultant.

SYDENHAM SETS UP SOCIAL STUDY UNIT

Times (N.Y.) 7-5

Community Relations Institute Will Supplement Hospital's Medical Services

Tues. 8-5-47

PLAN IS FIRST OF ITS KIND

8-5-47

Similar One in England Called 'Academic,' While Aim of This One Is to Be 'Practical'

Sydenham Hospital, which nearly four years ago pioneered in the establishment of an inter-racial staff for an inter-racial clientele, announced yesterday another experiment designed to broaden the institution's community role in Harlem.

21c N.Y.

The hospital, at Manhattan Avenue and 123d Street, has set up an Institute of Community Relations, headed by a social scientist, and has mapped a tentative program of study into the diseases—both physical and social—of the area, using the methods of the sociologist as well as of the medical man.

8-5-47

According to Dr. Alfred E. Cohn, a member emritus of the Rockefeller Institute for Medical Research and a director of Sydenham Hospital, the program is something new for a hospital and an important advance in the field of medicine. For the first time in this country, he said, the study and care of sick individuals and the study of the ills of a community will be carried on under one roof.

Heading the new project will be John A. Morsell, youthful former research associate of the Bureau of Applied Social Research at Columbia University. He is a Negro. Working with him will be staff physicians, psychiatrists, psychologists and graduate students from Columbia's Department of Sociology, which will serve in a technical consultant capacity.

To begin with, the hospital will finance the work of the institute; but according to Dr. Cohn, who is credited with conceiving the plan, other funds are in sight from organizations interested in "getting the same answers."

Similar Program in England

There is only one other comparable program under way, Dr. Cohn said. It is at Oxford University in England, where a department of social medicine has been founded by Prof. John A. Ryle. But at Oxford, Dr. Cohn pointed out, the emphasis is academic. At Sydenham it will be practical and social, with the needs of the community the important factor.

In Dr. Cohn's view, the founding of the institute is a part of the modern tendency to treat disease by digging into economic, psychological, religious, political and family circumstances of the patient. "It may be an answer to the demand, now growing stronger, that life is viewed as a whole," he declared.

Mr. Morsell outlined three possible functions of the agency, although he by no means limited the institute to them.

First, the institute would carry on a continuing scientific self-scrutiny in order to check on the degree to which the hospital was fulfilling its social needs. This would be done by systematic interviewing of out-patients.

A second function would be the collection, correlation and interpretation of basic information and statistics about the community and its individuals as related to health.

A third area of investigation would be into problems other than those connected with the hospital. These would include personal and family relationships, sub-group and class differences based on income, origin, regional origin, and the like. In each case the institute would delve into fields where social and medical problems touched or overlapped.

"All this should mean that eventually the institute will be regarded as a community resource rather than just a resource of Sydenham Hospital," Mr. Morsell said.

Prof. William H. Kilpatrick, Professor Emeritus at Teachers College, Columbia, will help guide the work of the institute as chairman of the hospital's committee on community relations.

21c

Miss Davis Aids Sydenham Hospital

NEW YORK.—Sydenham Hospital, America's only inter-racial voluntary hospital, located in Harlem, at 123rd Street and Manhattan Avenue, was the recipient last week of three new-type plastic oxygen canopies and an aspirator, representing the gift of Ellabelle Davis, distinguished American Negro concert soprano.

The oxygen canopies, of a type providing free vision for the patient and alleviating the fear of being closed in under a tent in cardiac, pneumonia and accident cases where oxygen must be administered; and the aspirator, which will be the first permanent suction instrument of its kind installed in the Sydenham nursery, were purchased for the hospital by Miss Davis with the sum of $500.00 which she received as settlement in a recent Civil Liberties case against a West Side Manhattan restaurant which had denied admission to a party composed of the singer and three white friends. The verdict in Miss Davis' favor represented the maximum award in a Civil Liberties case.

Others Who Gave to Sydenham

PM New York, N.Y. Thurs. 1-30-47

PM previously has printed 21,300 names of contributors to the "Save Our Sydenham" Fund and here are additional ones. More names will be published subsequently. Total is now $294,371.

1-30-47

MANHATTAN

Adam Hat Store Employes 7
Agger, S. 10
Akra Lodge 50
Amal. Bank of N. Y. Employes 30
Amco Bag Co. 10
A. M. E. Zion Church 250
Amerman, J. J. 25
Amsel, Anita S. 2
Argonaut Bldg. 9
Armoogan, James 1
Arnetta Tent No. 7, Members of 5
Arronee Club 5
Assn. Pro Independencia
Auslander, Mr. & Mrs. D. 50
De Puerto Rico 10
Barrett, Caryl 10
Bartlay, Ltd., Employes 7
Bayne, E. 2
Beckett, Rebecca 5
Bell, Vernon O. 1
Berland, E. B. & Friends 17
Berman, Myron P. 30
Berman Paper Corp. Employes 30
Berner'w Pharmacy Employes 25
Bistritsky, Marcus L. 25
Blumstein, L. M. 250
Bordon, Florence S. 10
Brace, Clement 30
Briekman, Henrietta & Friends 5
Brighton Liquor & Wine Corp. 10
British-American Trading Corp. 5
Brooks, H. R. 1
Burg, Max 5
Carroll, Robert R. 5
Chisholm, Hugh H., Jr. 25
City Wide Supply Co. 5
Cohen, Mr. & Mrs. Sylvia 20
Cole, Betty & Charles 2
Cooper Jr. H. S. 120 1.57
Cooper Union H.S. Fund 6.51
Cosmopolitan Tennis Club, Inc. 25
Cyrus, William 1
Dana, Mary H. & Boyd, Elizabeth F. 10
Danziger, Frederick S. 25
Davis, B. S. 5
Davis, Mrs. Joseph H. 5
De Filce, Harriet 1
Dominica Benev. Socy. 10
Dorn, Robt. 10
Dube, Mrs. I. F. 10
Eastern Warehouse Service 10
Ebenstein, Marie 3
Ehlers Lodge No. 953 75
Engel, Sylvia S. 3
Emergency Comm. of Arts for Sydenham Hosp. 1144
Eveready Electric Co. 10
Farb, A. 5
Feldman, Mr. & Mrs. M. 5
Fibel, Anna P. 5
First Dist. Dental Socy. 50
Fischner, Mary 1
Ft. George Club Communist Party 15
Fountain, Bruce C. 2
Fowler, Essie Mae 5
Fox, Nathan, Co. 10
Frank, Albert 5
Freedom Youth Club 10
Furniture Workers, CIO 8.50
Gad Lodge, Free Sons of Israel 2
Ganz, Abraham 2
Garlington, Jack 10
Gedney, Elizabeth 10
Gitterman & Co. 50
Goldberg, E. L. 10
Goldberg, Mr. & Mrs. S. 2
Gottlieb, Leslie Eve. 5
Gray, Mrs. Theresa 1
Greater N. Y. CIO Relief Fund 144
Greenberg, Alfred N. 5
Greenwald, Capt. A. F. 5
Grunwald, George 2
Guiding Star Lodge 8-A 15
Hamilton House Staff 10
Lamm Hous. Office of U. S. Chief of Counsel 2
Harris, Natalie P. 5
Harrison, Bradley 2
Hathaway, Gertrude S. 100
Hirschhorn Foundation, Inc. 50
Horn & Hartdart Colored Employes Relief Assn. 100
Horowitz, Philip 40
Hunter College H.S. 100
Hunter College Hillel Foundation 10
Hurst, Clarence R. 5
Irwin-Harrisons Whitney, Inc. 10
Israel Temple of N. Y. C. 25
Jack & Beatrice Hunter Welfare League, Inc. 25
Jacob H. Schieff Center Club Dept. 10.50
Jacobus, Lilo 3
Jasmine Club 2
Kauders, Joseph 5
Kefer-Walsh, Inc. 10
Kirjofsky, Mina 2
Kirschenbaum, Abr. I. 5
Kissel, Irwin R. 100
Kleinfeld, Irving 10
Kohn, Lee, Class of 1950, CCNY 89
Kringle, Mrs. Rose 5
Kronenberg, Dr. Bernard. 10
Krasney, Mr. & Mrs. H. 1
Kuniyosh, Class of the Art Students League 4
Ladies' Aux. of Hotel Bellmen Benef. Assn., Inc. 25
La Cremaillere 10
La Forest, Mattie 3
La Marquise Footwear, Inc. 100
Lazar, Jack 3
Lefkowitz, Julius 50
Lewis, Marg. & Friends. 25
Lieberfeld, Daniel 10
Liebowitz, Charles 10
Liptov, Master 2
Lorch, Otto 5
Mack, Edward C. 100
Malino, Jerome E. 15
Mann, Mrs. Alice 1
Max Blumberg Ladies Sick Relief Socy. of B'klyn. 25
McElivee, Lucy 2
Metropolitan Baptist Chr. 200
Miller Auto Radio Co. 10
Morand, Mrs. Paul P. 20
Mueller, Mrs. Herman 10
Muller, Elisabeth D. 5
N.A.A.C.P. Chap. of SSEA 32.06
Nash, O'Brien & McMahon 20
National Assembly of the Student Christian Assn. Movement 140
Natl. Union of Marine Cooks & Stewards 50
Natl. Urban League Staff 3.50
Newborg, Mrs. Sidney 10
Newman, Maurice 5
N. Y. Women's Aux.—Natl. Maritime Union, CIO 7.30
Norwood Handkerchief Co. 5
Officers Assn., 15th Reg. 100
Omni Products Corp. Employes 25
Ottley, Raymond R. 2
Pallach, Egon Max 2
Panoramic Radio Corp. 10
Paramount Furniture Industries Co. 25
Park West Consumers League 10
Patterson, Joan 50
Peterson, Cuthbert, Sr. 2
Pettway, Mrs. 5
Post, M. S. Murphy 10
Pratt, John F. 5
The Professionals 100
Progressive Mothers Club 10
Provincetown Theatre 219.20
PS 184, Class 5-1 1.30
Quality Electric Co. 5
Rapoport, Mrs. S. 10
Residents Assn. of 92d St. Branch of YM and YWHA 17
Richman, Paul 1
Robinson, Joseph 5
Rodith, D. & Sons 3
Roggern, Freda H. 2
Roosevelt Hotel Guests or Employes 5
Rosenberg, Irving 5
Rosenfeld, Harry, Inc. 15
Rosenson, Dr. Mitchell L. 10
Rudolph Grossman Society of Congregtaion Rodeph Rutland Dress Co., Inc. 20
Sholom 10
Sadowsky, George 10
St. Matthew Mission 25
St. Philip's Parish House. 365
Salmon, Arthur 25
Satler, Wm. 5
Schifter, Joseph 10
Schorr, Dr. Louis 5
Schram, Mrs. E. 10
Schwartz, Sarah 5
Segal, Mrs. Maurice 5
Shoe Factory Supply Co. 5
Siegel, Mrs. Allen 24.50
Sieher, Mrs. Albert 3
Slatoff, Ellis 50
Smith, Louis L. 25
Snyder, Edith R. 2
Sokel, Ben 1
Somers, A. 1
Sol Cafe Mfg. Corp. 20
Spndau, J. 1
Spier, H. 2
Stage Children's Fund, Inc. 10
Stein, Robert M. 100
Steiner, Dr. Martin 20
Stern, Bern 1
Sternlight, Bernard 25
Strickler's Harlem, Inc., Employes 26
Student Body of CCNY-YC-PAC 240
Students of English & Citizenship Class, PS 64 2
Sun Window Cleaning Co., Inc., Employes 15
Tamlins, S. A. C. 5
Tarr, Mathilda S. 6
Terrano, Charles 5
Topping, Ira J. 10
Transport Workers Union of America 100
United Hospital Campaign Comm., 1946—Distributed by United Hosp. Fund of N. Y. 1000
United Office & Professional Workers of America, CIO 25
United Service for New Americans, Inc., & USNA Chapter of Social Service Employes Union 191.75
UNZ and Company 10
Upper Stuyvesant Club of Communist Party 20
Vallin, Josephine 10
Varchaver, Catherine 1
Vogel, Kurt J. Workers. 5.50
Vogelbaum, Robt. 5
Waltham Shirt Co., Inc. 25
Members of Washington Heights Chapter 425, B'nai Brith Women's 10
Washington Irving H.S. Menorah Club, Section 175 5
Weene, Ida 3
Weil, Julie 5
Anonymous (through People's Voice) 62
Harlem Furniture & Bedding Co. 25
Harvey, W. C. (employes of various banks) 41.25
Guild for the Jewish Blind 5.50
Kauth, Benjamin 5
Leffert, S. 2
Gordon V. Lyons 100
Rex-all Lodge (Knights of Pythias) 50
Albert Smith 5
Standard Beveling & Silvering Co. 5
Taylor, Jenevie 5
Vermus, Rose 5
Youth Builders Playshop. 10
Golding, Mrs. Bernard. 10

LONG ISLAND

B'nai Brith—Franklin D. Roosevelt Lodge 100
Gray, L. A. 10
Schwartz, Dr. S. 5
Spiegel, Mrs. Ema (can collection) 20.48

BRONX

Dewitt Clinton H. S., Fred. Douglas Socy. 74
Golden, Helen & Louis 5
Riemer, Alice & Friends. 16
Truth Lodge No. 881 10

BROOKLYN

Crawford Clothes Staff 10
Ehrlich, S. L. 5
Eisner, M. 3
Eric, Loraine & Madeline 2

CONNECTICUT

Rae Gans, New Britain. 1

VIRGINIA

Women's Council for Interracial Cooperation, Norfolk 1
Mary U. Halla, Arlington 2

NO ADDRESS

Basdon, James 3
Bederson, Mr. B. 1
Dean, Mrs. Blanch Powers, through Mr. Collins 10
Group of Hospital Workers, Local 344 17.25
Levinson, Irving 5
Most Worshipful Grand Lodge of State of N. Y. A. F. & M. 6
The New Land Foundation, Inc., Wolfgang S. Schwabacher, Pres. 1000
Office Group 8.66
Pappenheim, Else 20
Rogers, Joseph L., through Alan L. Dingle 20
Schneik, Jack I., M.D. 5
Silverstein, Benj., In Memory of, through Mr. & Mrs. Louis Schur & Mr. & Mrs. J. Lipton. 20
Spencer, Herbert 5
Blair, Harold 10
Booth, Donald (from Christmas Reunion group of Hostilers 16.59
Caraway Food Shop 5
Fehlman, Frank 20
Friedman, Belle 5
Goldsmith, Lawrence L. 100
Gross, Dr. David 5
Jackson, Blanche 3
Latner, Julius 10
Levinren, George 5
Monblat, Erwin 5
Nossal, Fred 10
Owen, Sam 10
Pava, Pvt. T. 5
PM Admirer 1
Reich, Dr. Adolph 5
Rosen, Oscar 5
Seiden, M. L. 5
Sheldrake, Loch 16.21
Shueman, Bernard 10
Simkin, Henry 5
Simon, Mr. S. 5
Ungennannt 1
Ungenannt 3
Yohalem, Simon 100
Calves, Mr. & Mrs. M. C. 20
Sims, Elizabeth 10
32 Anonymous 955.44

From the Editor

PM New York, N.Y.
On Sydenham 21c
1-30-47

Some of our readers have written to express concern about the recent severance of David Dorin as director of Sydenham Hospital. Many of them have contributed to the $300,000 hospital fund which is now going over the top—in fact, almost all the money came through PM readers. Thurs. 1-30-47

Since the inception of the drive I have made it my business to keep in touch with the Sydenham situation. The first thing I learned was that there were differences of long standing between Director Dorin and the members of the board. Most of the differences concerned personalities and a failure to develop satisfactory working relationships between them.

It was my first flash opinion that there was nothing that couldn't be cured by locking the board and the director in a room together for three or four hours, hoping they would come out with some kind of an arrangement that would be workable, if not cordial. It soon became clear that this was too optimistic, and that one side or the other had to yield if the institution was to run in any kind of an orderly manner.

The differences found their outlet in many false and absurd charges and some equally false and vicious gossip which battered around. But the fundamental fact was that Director Dorin and the board just naturally couldn't get along together.

It is usual in a situation like this, where an appointee of a board cannot work out a sound relationship with the board afterwards, that the board stays and the appointee goes. That finally happened at Sydenham.

I regret to see Director Dorin leave. He was a strong man and in many respects a tough one—but he was not tough to sick people. He certainly was the ideal man to do the job that he did at Sydenham when he took it over three or four years ago. He gave it a thorough overhauling and really made a hospital of it.

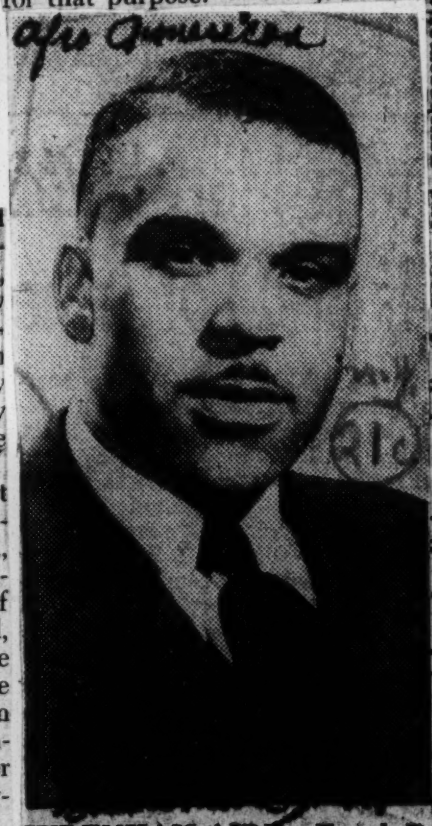
On the other hand, he didn't have any monopoly on concern for the welfare of the hospital, on working in its interests, or on nurturing and protecting the interracial idea which is the heart of the whole enterprise. Members of the board, many of whom I know personally, have been just as interested in preserving and developing this integral part of the hospital idea as the administrative staff. They wouldn't have been on the board in the first place if they weren't—for since the reorganization the whole purpose of Sydenham has been to create a good interracial hospital. It is unfortunate that tensions and friction, which developed during the weary years when the hospital was operating on a constant deficit and on the ragged edge of failure, blew into the open the first time money to secure the operation had come in. But it happened. Thurs. 1-30-47

However, I am convinced that the blow-up will not mean a watering down of the interracial idea, nor of the services of the hospital. A number of the members of the board are outstandingly good, conscientious people—and the Board has been strengthened more recently by the addition of men such as Dr. Alfred E. Cohn, member emeritus of the Rockefeller Institute, which is in itself a guarantee. PM New York, N.Y.

With the support the hospital has now received from the public, I think there is no doubt but that Sydenham will grow and develop—not only as a hospital, but as a living force for social betterment and interracial goodwill to an extent greater than ever before. I have every confidence that the board will see that this is done. On PM's part we will continue an active interest in the hospital.

—John P. Lewis

P. S. There has been wild talk that the retirement of Director Dorin was a double-cross of the people who gave their money to keep Sydenham operating, and that contributed funds would be used to pay off Mr. Dorin for services not performed during the unexpired part of his five-year contract. I have no hesitancy in saying that this talk is wholly without foundation. Money was given, I am sure, not as a personal contribution to Director Dorin, but as a contribution to an interracial hospital. I am convinced he would not accept contributed money if it were offered, which it will not be. If any settlement is required to be made to Mr. Dorin for the unfinished part of his contract, I have been assured by members of the board that they will meet that obligation personally; that no hospital funds, contributed or otherwise, will be used for that purpose. —J. P. L.



SYDENHAM AIDE—Frank B. Adair, 34, of Atlanta, whose appointment as assistant executive hospital director of Sydenham Hospital, N.Y., was announced last week. He holds an M.A. from the Harvard School of Business Administration. Tues. 1-28-47

SYDENHAM'S EXPERIMENT

Times-New York, N.Y.

Sydenham Hospital, which four years ago appointed Negroes to its medical and nursing staff and included them among its trustees, announces the creation of an Institute of Community Relations. The hospital is to practice good corporeal medicine, the new institute ordinary sanitary precautions, unhappy separable in a kind of social medicine. In a quarter like Harlem the relation of a hospital to its social environment is of peculiar importance. Bad housing, overcrowd ills, outrageous rents, lack of recreation

21c

if it does no more than rid itself of much unnecessary paper work with which all public institutions saddle themselves, if it can make Harlem feel that its wards are a real haven for the sick, and that its doctors and nurses are good Samaritans and not well-meaning but aloof professionals, it will set an example that will surely be followed. A hospital should be as much a part of community life as the grocery on the corner if it is to serve its medical purpose. Sydenham realizes this. If it carries out its intention it will do as much for its community as the community will for its many important services. Thurs. 9-7-47

The staff of resident physicians and internes at Sydenham Hospital, Manhattan Ave. & 123d St., only interracial hospital in the country, includes natives of Canada, Iraq, India and Mexico as well as the U. S. P.M. New York, N. Y., Mon. 9-1-47

Letter From the Editor

A Chance to Help

PM's readers, I think, will be especially interested in the story on Page 12 today. It's sort of a special dividend on the support our readers gave to Sydenham Interracial Hospital a little less than a year ago. P.M., New York, N.Y.

When PM received a call late Tuesday night from one of its readers that streptomycin, which has been called the wonder drug, was needed in Prague, Czechoslovakia, in a fight to save the life of a little boy suffering from meningitis, our first thought was to call Sydenham. We told the story to Dr. Sigmund L. Friedman, director of the hospital. Thurs. 9-4-47

He asked only for time to confer with his meningitis experts at the hospital. No exact information on the diagnosis of the boy's case was available, but the doctors agreed that streptomycin is beneficial in treating some forms of the disease, and Dr. Friedman immediately volunteered to supply the amount needed.

I'm emphasizing the part of Sydenham Interracial Hospital in this case for one reason: it gives a chance to point up the less dramatic service Sydenham provides day in and day out here at home. It isn't often that a hospital has a chance to help save a life halfway round the world; and most of Sydenham's work is done without benefit of oversea airplanes, much closer to home—in the borderline neighborhood between the Negro and white sections of Harlem. It is this less dramatic service which never gets the headlines that is the real reason for Sydenham.

The men who direct Sydenham believe that a modern hospital should be of more service to the people than merely providing beds for the sick. Recently, Sydenham made a pioneering step in modern hospital practice by opening an Institute of Community Relations. The Institute will deal in more than drugs and hospital beds and medical service by helping to work out social and community problems in the neighborhood it serves. Thurs. 9-4-47

The hospital is dependent for its continued existence, and for the money to help out in cases such as this one, on contributions from people who believe as it does—that a hospital's chief job is human service, whether for the physically or socially ill.

The cost of the drugs dispatched to Czechoslovakia was comparatively small—about $200 at retail and about half that at the prices charged to hospitals—but I think PM's readers will want to share in meeting the expense. I have an idea they'll send in far more than the amount involved as a means of helping to continue the work of the hospital right here in Harlem. Contributions may be sent either to the Sydenham Hospital Fund, care of PM, 164 Duane St., N. Y. C., or direct to the hospital at 545 Manhattan Ave., N. Y. C.

British League Flays Rumor; Finds Only 1,700 Tan GI Babies

Chicago Defender, Chicago, Ill., Sat 5-17-47

By GEORGE PADMORE

LONDON—While it is encouraging to learn of the widespread sympathy among the American people for the unfortunate colored children left behind in Britain by GIs, not always through their own fault, it is regrettable that rumors and reports have grossly misrepresented the situation.

The British press, quoting alleged New York interviews with E. J. DuPlan, secretary of the Negro Welfare Center of Liverpool, in the United States to raise money for the African Church Mission currently housing some ten or 12 of the war babies, reports conflicting or untrue statements. Sat. 5-17-47

For instance, fabulous figures of the number of colored GI babies have been released.

There are only 1700 of such babies, according to a survey made for the League of Colored Peoples by Miss Sylvia McNeill.

Further it has been said that the United States government plans to send in nine months a fully equipped ship to bring 5000 babies to the United States. High U. S. government officials in London absolutely refuse to confirm this.

U. S. Accepts Responsibility

Commenting upon the League survey, Dr. M. Joseph-Mitchell, the organization's general secretary, strongly condemns the alarmist reports which DuPlan is alleged to be making to the American public. "It is a shame," Joseph-Mitchell said, "that the work which is being done and which was originated by the League should be poached upon in this way and just at the time when we have been able, through the American Embassy, to get the United States to recognize their obligation to the children of GIs in this country."

Through contributions of both British and Americans, the League has established a large and commodious home for 70 of these children, the Rainbow Children's Home supervised by Mr. and Mrs. J. A. R. Russell. Meanwhile the League drive for funds for another home for a hundred children continues. Sat. 5-17-47

Turning to the question of all the warm-hearted Americans who wish to adopt these babies, Dr. Joseph-Mitchell says that while Britain has officially more or less ignored these tan-yank children, it will not permit their adoption without much red tape, investigating sound character and financial backgrounds for children now resident in English slums.

"In the first place, the consent of the Secretary of State for Home Affairs is necessary," for such adoption, Joseph-Mitchell points out. "In the second place, the American Immigration Department will also have to grant its permission to each applicant. Moreover, a guardian must be obtained to accompany each child across the Atlantic. It will be seen from this that the question of adoption is not any easy one."

There are only two organizations with which the British Home office will deal in conjunction with these children. They are the League of Colored Peoples and the British Family Welfare Association.

VA Pledges Aid

The United States has indicated, too, that where paternity is known, as it is in a great majority of the cases, thanks to efforts of the League, the Veterans Administration will allot the appropriate share of any compensation, training or subsistence allowance, or oughly, any other type of benefit that the general veteran may be receiving from the U. S. Veterans' Administration, for the maintenance of the child. Sat. 5-17-47

New Sydenham Hospital Head Keeps Anti-Bias Policy

World Memphis, Tenn. 2-18-47

NEW YORK — (ANP) Sydenham hospital's new director, Dr. Sigmund L. Friedman, announced publicly here last week that his administration will not change the policy of operating the hospital under a voluntary interracial basis.

Dr. Friedman replaced David M. Dorin, as director, following a dispute between the board of directors and the previous administrator. According to George R. Leighton, public relations director of the hospital, the change was effected upon the board of directors' contention that Dorin was guilty of "insubordination" and had failed to "obey orders of the board." Dorin, in rebuttal, brought suit against the hospital, charging breach of contract. The suit, asking $61,000, contends that his contract does not expire until 1950.

Expressing the conviction that "the best place to prove that race, creed and color have no importance is in a hospital," Dr. Friedman said that he would not "under any circumstances be party to any type of discrimination." He also declared that he saw no "reason for not promoting a physician according to his ability,' and evinced a hope to help safeguard the achievements which the institution "had made thus far in the social as well as the medical spheres." 2-19-47

Sydenham hospital has temporarily overcome its financial difficulties, as a result of a recent fund raising campaign. The drive netted a total of $304,024.

son's Festival Negro Chorus of New York City. Sun 1-19-47

They Gave to Sydenham

PM New York N.Y. Tue 1-13-47

PM previously has printed 21,690 names of contributors to the "Save Our Sydenham" Fund and here are additional ones. More names will be published subsequently. Total is now $296,230.

MANHATTAN

Dora's Beauty Salon..... 20
Heller, Anna 10
Kahn-Weinstein, Inc. 10
Klein, H. R., for Air Documents Div. Personnel A.A.F. 38.50
Lovithan, Sadie F..... 2
National Ladies Specialty Corp. 25
Orwasher, A. 10
Rose-Ann, Inc. 10

BRONX

Diamond, Dora 2
Kepos, Ida 4
Samuels, Mr. & Mrs. H.. 3
Tubin, E. 2.50
Victoria United Benevolent Society, Inc. 25

BROOKLYN

Calmus Silver Family Circle 5.25
Katz, Gertrude 10
New Utrecht H. S. Senior Arista 25
Stillman, Mr. & Mrs. J.. 5
Vine, Rose 3

LONG ISLAND—QUEENS

Meyrowitz, Mr. & Mrs. D. 5
The Ozone Knights Social Club, Ozone Park..... 20

OUT OF TOWN

Lefsky, Harry, Stamford, Conn. 2
Goldstein, Mr. & Mrs. L. M., Ft. Wayne, Ind.... 2
Bodarky, Edith, Lathersville, Md. 2
Mayer, Mr. & Mrs. Robt., Sharon, Mass. 10
Simon, A. J., St. Louis, Mo. 10
Hellebust, Ruth & Doris, Great Falls, Mont..... 10
Summit Community Church Untarian Sun. School, Madison, N. J.....2.41
Appleton, Mrs. Marc, for a group in Croton on Hudson, N. Y..... 20

PM Readers' Gifts Put Sydenham Drive Over Top

PM New York, N.Y. Tues 2-4-47

21c N.Y.

The drive to save Sydenham Hospital went over the top today. It crossed the $300,000 goal with donations which now total $302,168.

Credit for saving the only voluntary interracial hospital in the U. S. A. belongs largely—almost entirely—to the readers of PM. This newspaper first put to them the story of the hospital's desperate plight on Nov. 28, and in the next 69 days they did the rest.

Some 20,000 sent in their contributions. Money came from all parts of this country, from Canada and from overseas. It came from individuals and groups. It came from shops and clubs and classrooms. It came in pennies and dollars and big checks.

Just 10 weeks ago, PM learned that Sydenham was in trouble and published its first report that the hospital "faced the grave possibility of complete shutdown for lack of funds." The *Herald Tribune, Times* and other New York newspapers reported the situation and gave the fund-raising drive nominal coverage.

PM put on a full-dress campaign. PM reporter Gene De Poris and photographers told the story of the hospital's own fight for life in whole pages. Coupons which appeared in PM began flooding back by thousands to William G. Lord, Sydenham's treasurer. Radio stations picked up the material and dramatized it for broadcast. Entertainment stars put on several benefits.

The first urgent peril to Sydenham was that its 24-hour-a-day ambulance service would be discontinued. The deadline was only 48 hours off. It was toward saving that service for the half-million residents of Harlem that PM first directed its appeal. Its readers were urged to raise $50,000 immediately. Tues.

On Sunday, Dec. 1, in the midst of the Thanksgiving week end, it was announced that Sydenham's ambulance service would continue through another week. 2-4-47

By Thursday, it was no longer a question of saving the ambulance service. PM's readers had raised the sights. Their outpouring of contributions suggested the possibility that had seemed an impossibility—a drive for the whole $300,000.

The accounting on that day was: new receipts, $7456; total $105,743. PM New York

Now the crisis is over. Sydenham Hospital's continuance is assured. But its permanence is not yet assured. The money that has been raised has enabled the hospital to wipe out debts of $150,000 to suppliers. Some of the debts had stood for three years and the dealers had informed Sydenham they no longer could afford to extend credit. The hospital has a reserve of cash to carry it forward but still will need support to remain solvent. Tues 2-4-47

There are many reasons Sydenham's continued existence is vital to New York City. New York, N.Y.

The area it serves has a mortality rate 36 per cent higher than the average for Greater New York, a death rate from tuberculosis six times higher, an infant mortality rate 82 per cent higher than the next highest section of the city, a maternity mortality rate three times higher and a venereal disease rate 46 per cent higher.

Since 1943, Sydenham has operated on an inter-racial basis unique among voluntary hospitals in the U. S. A. If it were to close, Negro physicians would lose their one hospital affiliation where the only line drawn is against Jim Crow.

SYDENHAM HOSPITAL AIDED

$1,000 Check Brings Total in Fund Drive to $286,000

New York N.Y.

With a $1,000 check from a benefit entertainment held Jan. 11 in Town Hall, Sydenham Hospital has obtained yesterday $286,000 in its $300,000 fund drive. Sun. 1-19-47

Harry C. Oppenheimer, president of the hospital's board of directors, made the announcement in accepting the check at the hospital at 12th Stree and Manhattan Avenue. The new gift was tendered by Eric Bernay, co-chairman of the hospital's emergency committee on arts.

Another benefit for Sydenham will be held Jan. 27 by the Ethical Culture Society in its auditorium, 2 West Sixty-fourth Street. Scheduled to aid are Ruth Draper, Mrs. Eleanor Roosevelt, Maxine Sullivan, Josh White and Hall Johnson's Festival Negro Chorus of New York City.

SYDENHAM ATTAINS ITS $300,000 GOAL

Contributions Continue After

Reaching $301,807—New Director Takes Charge

New York N.Y.

Sydenham Hospital, the interracial institution at Manhattan Avenue and 124th Street, has overcome its temporary financial difficulties, it was announced yesterday. Sun - 2-4-47

Threatened last November with a shut-down because of a lack of funds, the hospital reported that its appeal for $300,000 had been answered by more than 20,000 contributors. The amount received up to yesterday was $301,807, with contributions still coming in.

"The crisis, brought on by old debts assumed at the time of our reorganization and by the costs of essential renovation of the hospital plant, has been surmounted, and Sydenham now can face the future with a measure of optimism," said the Rev. James H. Robinson, chairman of the emergency fund-raising committee.

Contributions of $1 or more came from every State in the nation. Numerous benefit performances were held throughout the city and others are planned for the next three weeks.

Dr. Sigmund L. Friedman, who was named director of the hospital after a dispute between the board of directors and the previous administrator, took up his new post yesterday.

Sydenham attracted national attention in 1943 when it was reorganized as the first interracial voluntary hospital in the country. At that time Negro members were elected to the board, Negro physicians were appointed to the staff and the services of the hospital were offered to all races and creeds.

Sydenham Over the Top

Daily Worker Tuesday 2-4-47

Contributions to the fund to save Sydenham Hospital now total more than $300,000, it was announced yesterday. Rev. James H. Robinson, chairman of the Emergency Fund Raising Committee, said contributions are still coming in and that a series of benefits scheduled to occur during the next three weeks promise to increase the hospital's fund substantially. Atlanta Ga.

Rev. Robinson said, "and Sydenham can now face the future with a measure of optimism."

Confronted with the possibility of closing last November, Sydenham Hospital made an appeal for $300,000 on Thanksgiving Day. More than 20,000 persons and organizations, from every state in the union, responded to the appeal.

Others Who Helped Save Sydenham

The "Save Our Sydenham" Fund has reached $278,880. PM previously has printed 15,158 names of contributors, and here are additional ones. More names will be published subsequently.

MANHATTAN

Abrahm & Koenig 10
America Labor Party, 13th A. D. 16.25
Amerling, Mrs. Paul 5
Apollo Theater Proceeds 3000
Arnowitz, Mrs. Evelyn 8.25
Barrack, Hyman 5
Basketball Team & Pupils of PS 120 ..... 111.73
Bazell, Solomon N. 5
Behrman, Olga 2
Belle Novelties, Inc. 10
Bernath, Lo 12.50
Bernstein, Daniel J. 500
Beth Sholom, Men's Club. 50
Bischoff, Gilbert R. 5
Bogner, Dr. Inge A. 10
Buchler, Sidney S. 2
Burton, O. R. 3
Cadillac Textiles, Inc. Employes 27
Local No. 302, AFL, Cafeteria Employes Union. 100
Calechman, Pearl 2
Campagnano, Leo & Gerty
Cantor, Mr. & Mrs. I. 5
Causey, Clara G. 2
Chapelle, Dorothy 1
Claireborne, Adrienne 7
Class 8A-5 of JHS 164. 5.50
Cohen, Cathreine & Clarman, Ann 10
Cole, Edward 15
Cole, Mr. & Mrs. B. 2
Crown, Mrs. Alfred W. 5
Curtis, L. & Friends 26.25
Davis, Lucille 3
Decca Records Employes. 17
Delta Chapter, Zeta Tau Fraternity 10
Denby, Estelle 25
Dinerman, Matilda 2
Edelstein, J. 3
Einbinder, Ann 5
Enos, Marjorie V. 5
Epstein, Joshua S. 5
Esteve, Carlos 2
Farrell, Thomas 25
Felchman, Mr. & Mrs. L. 3
Feder Industries, Inc. 4
Fever, Max 5
Forman, Lillian 10
Gair & Gair Office Staff. 15
Garlington, Jack 5
Gluckstein, Phil and Employes 131.50
Gottlieb, Samuel 5
Gottfried, Eric 5
Gottfried, Kurt 5
Golden, Harriet 2
Goldstein, Frances 5
Goode, Mr. & Mrs. W. 2
Gottlieb, Henry 10
Greenhill, Kalman 100
Hackel, Bertram 5
Hall, Mrs. Allan 2.50
Halsey, Agnes 1
Hansman, Dorothy 3
Heimowitz & Heimowitz. 25
Helene Feather Co. Employes 10
Heyman, Sidney, Co. 10
Heyman, Heller 5
Heyman, Theodore 5
Hicks, Barbara A. 10
Hobart, Harold C. 2
Hochman, Dorothy 1
Independent Prgoress 75
Club, Institute of Relig. 5
Joseph, Chas. M. 3
Judson, Henry, Hotel 1
J.H.S. 118 100
Faculty Collection of J.H.S. No. 164 ..... 42.50
Jane, Betty, Frocks, Inc.. 10
Kline, Mildred 1
Knecht, Harold 1
Kraft, Erwin 10
Lexington Silk Co. 10
Lenbsdorf, K. 10
Lulis Company 100
Maass, Ernest 2
Malone, Mrs. & Mrs. R. 5
Manhattan Women's Div., Am. Jewish Congress.. 100
Maskowitz, N. 5
Mazin, Abraham 5
Miller, R. A. & Friends. 25
Miss America Magazine.. 5
Mondschein, Bella 5
Montserrat-Progressive Society, Inc. 50
Morgenthau, Mr. & Mrs. Henry, Jr. 25
Mullen, T. R. 25
New Drug Store 5
N. Y. Office of National Housing Agency 32.61
Olleo, Sara 5
Osber, Mr. & Mrs. Dan. 2
Palmer, Arthur H. 10
Palter De Liso 50
Palter De Liso Cutting Room Employes 33.75
Pam y Foundation 100
Passighi, Bruno 10
Local 120, Pattern Makers (CIO) 15
Pierrette Textile Co. 25
Plumbers' Union Office Staff 4
Police Athletic League Choir Children 5
Ragozin, Harry 100
Pomerance, Joseph 10
Rappaport, Derwin 25
Red Rose Social Club 5
Resnick, Ruth 5
Roberts & Leinmauber 25
Roberts & Leinmauber Co. Staff 13
Robbins, Jack 5
Rogers Corner Employes. 50.50
Rosario, Isabel 50
Rosenthal, G. 1
Rosenzweig, Mr. & Mrs. 7
Scheider, Mrs. Alfred M. 5
Schulkin, Mr. & Mrs. Wm. 10
Schwartz, Mrs. Tillie 10
Scully, Mr. & Mrs. John. 5
Selvester, Mrs. Jos. L. 2
Sevittan, J. 2
Shaw, Absner Co. 10
Shaw, Janet 10
Shaw, oseph P. 5
Silon, Lillian 2.50
Spector & Chertoff, Inc. 10
Spiegel, J. H. Employes. 75
Stallmack, Florence 3
Stone, Alex & Jane 2
Straack, Pauline S. 5
Sussman, Rose 2
Teachers of PS 157 29
The Electric Service Appl. Repair 6.50
The United Retail & Wholesale Candy Empls. 25
20th Century Sportswear Co. Employes 25
Ullman, Grace & Anne 10
Ulius, Betty 5
United Friends 10
Washington Irving H. S. Class 6-2 3 5
Weil, Edrian, Inc. 100
Weill, Charles, Inc. 5
Weingart, William 4
W. Va. State College Club of N. Y. 25
White, Mrs. Charles 1
Wiseman, Joseph A. 5
Wolff, Mrs. O. R. 5
Wool, M. 5

THE BRONX

Abe Lincoln Chapter, AVC 30
American X-Ray Prod. Co. 25
Austin, Mrs. Mitchell R.. 10
Block, D. & R. 2
Bormus, Harry 3
Class 9A-2, Jr. H. S. No. 10 ..... 3.71
Club Avalon 5
Cohen, Rita 1
Ezersky, Alice 1
Fein, Ricky 5
Ferrara, John J. 15
First Stavishter Ladies Aux. 5
Goldenberg, Mr. & Mrs. G. W. 5
Gunther, Rita 1
Haimowitz, A. & Friends 10
Harris, Sam, Lodge No. 27, K. of P. 25
Heller, Mr. & Mrs. M. J. 5
Hirschenbein, Florence.. 10
Hoenig, Lester 2
Hyatt, Dolores 1
Imperial Linoleum & Carpet Co. 5
Janka, Abraham 5
Kagan, Martin E. 2
Kaufman, Ida 1
Klein, Esther 5
Lasky, C. 5
Local No. 1, Chapter 67, United Pub. Workers, CIO, Employes of Welfare Center 12.25
Meshbreg, Nathan 5
Messing, Anne & Elias.. 5
Millwan, Dr. & Mrs. L. J. 5
Mitchell, Ann 3
Newman Family Circle... 20
Odes, Helene & Al. 5
Pi Chapter, ULP Frat.. 5
PS 67, Parents Assn.... 5
Rosenfeld, Eugene 2
Savior, Volina N. 5
Sleep Prod, Inc., Box Spring Dept. 4
Solomonson, Irene 1
Stauler, Jack 2
Terry, Laurette 2
Van Damm, Mrs. Lenore. 25
Weinzweig, E. L. 3
Woodrow Wilson Chapter, AVC 14.15
Youngstein, Wm. and Shifrau, Allen 5

BROOKLYN

Abramowitz, Mrs. Mildred 1
Barth, Mildred 1
Becker, Samuel 5
Bergman, Mr. & Mrs. L. 15
Bloomstein, Milli 5
Chezar, Mr. & Mrs. Boris 2
Chill, Hilda 2
Chorostalo, Morris 10
Club Anchor Inn 5
Cohen, George 5
Cousins Club 7
Dental Class of B'klyn Specialty Tds. 10
Deutsch, David L. 3
Fair Knitwear Co. 7
Farragut Site Relocation Off., Office Staff.... 8.35
Feins Tin Can Co., The.. 25
Feigenbaum 5
Friendship Group of America 5
Gabler, S. 3
Garrett, Lou 1
Girls' H. S. Teachers.. 9.56
Goldman, Milton M. 5
Goldstein, Herman L. ... 4.70
Gordon, Irving 1
Gordon, Sara 2
Graff, Sam 2
Grand, Oscar 2
Greenstein, Mary 2
Grossman, Mother, Daddy and Peter 5.25
Group of Postal Workers. 15
Gutterman, H. 3
Hamilton, Mr. & Mrs. B. 5
Hauser, Peter S. 6.86
Inkeles, David 2
Itskowitz 3
Juels, Irving 2
Kaminetsky, Mrs. A. 3
Kassel, Bernice 5
Kaufman, Martha 1
Klaphotz Bros. 10
Lab Workers of Dept. of Lab. 8.25
Last, Mr. & Mrs. H. 2
Leff, Mrs. Sarah 5
Leibowitz, Roselee 2
Levenson, Helen 3
Lipstadt, Jack 3.68
Levinson, Myles 10
Markham, Herbert 1
Marron, Mr. & Mrs. S.. 2
Meide, Eleznor 2
Milhauser, Dr. & Mrs. J. 5
Minkoff, A. R. 3
PC No. 64, Classes 9-B3, 8A-4 and 7-A1 ..... 20.05
PS 54 Fund 255
Pomerantz, Styman 10
Parness, Gertrude 2
Real Form Girdle Co., Inc. Office Employes 8
Ronis, Sylvia 5
Seymour Fabrics, Inc. 10
Shaffian, Shirley 1
Silverschein, Melvin 2
Simon, Barry M. 5
Spat, E. Bernskin, A.. 10
Stimmel, A. J. 1
Tabak, Dr. David 2
T. & T. Group 20
Terry, Maxine 5
Uberall, Edythe & Irving 5
Wilson Dept. Store 5
Women's Action Group... 11
Workman's Benefit Fund. 20

QUEENS—LONG ISLAND

Cohn, Pearl K. 3
Corona Holding Corp. ... 5
Esformes, Mrs. Suzanne.. 2
Fein, Michael S. 5
Forest Hill H. S. 3.75
Gardenitz, Mitchel 5
Godetroy, Elizabeth 3
Goldstein, Lily & Harold 2
Tarrett, Lawrence 2
Jones, Emmett 2.50
Kew-Forest BBG & AA. 10
Levenson, Mr. & Mrs. B.. 5
Levy, Harry 5
Livingston, Dr. Alan A.. 5
Lowell, Rose 1
Prager, P. 1
P. S. 144, 8B 5.25
Rosenthal, Anne 3
Ryterband, Edw. Mel.. 2
Siegel-Dreher Family.... 5
Simon, Mrs. Mildred.... 1
Slomons Laboratories 15
Steiner, Ruth 2
Tankoos, Mrs. Meryl.... 2
Weiss, Mrs. Anna 5
Wittner, Melvin 5

ARKANSAS

Glynn, Mrs. H., Lit. Rock 1

CALIFORNIA

Kramer, R., Los Angeles. 10

CONNECTICUT

Arnoff, Louis, Lakeville. 5
Edelstein, S., Hartford... 4
Sevovitch, E., Walesbury 1

DELAWARE

Wealth Family, Wilmington 3
Lewis, Mrs. Leonard, Champaign 3
Matthews, Mrs. Wallace, Edelstein 1
Neumark, G., Chicago.... 3

KENTUCKY

Wallerstein, M., Paducah 5

MARYLAND

Hall, N. E., Baltimore. 5

MASSACHUSETTS

Bethl Israel Hospital Staff of Soc. Serv. Dept., Boston 11
Cobb, C. M., Boston..... 4
Fielding, H., Dorchester. 10
Group of Jewish Women from Swampscott and Marblehead 6.15

MICHIGAN

Isaacs, Ann, Detroit..... 5
Rubel, A. J., Jr., Olinet. 1

MINNESOTA

Fohrman, H., St. Cloud. 5
Levine, Raphael, St. Paul 3
Mitelacher, Helen, Minneapolis 5

MISSOURI

Perper, Peta, Columbia.. 1

MONTANA

Hellebust, D., Gt. Falls. 20

NEW JERSEY

Abramson, Mr. & Mrs., Bayonne 5
Bernstein, A., Paterson.. 10
Cantor, T., New Brunswick 3
Clemanck, Mrs. Mary, South River 5
Dembe, David, Bayonne. 5
Franck, E. J., Manasquan 5
Freedman, R., Hoboken... 5
Geller, N. N., Elizabeth 5
Gero, Margaret Passaic. 2
Kaplan, Samuel, Freehold 2
Menzies Family, Woodridge 5
Strassmann, Mrs. Bertha, Bayonne 5
Silverman, P., Asbury Pk. 2
Silverman, V. L., Newark 1
Smith, Mrs. Floyd, Rainfield 15
Wald, Mort., Newark.... 1
Weber, Addie L., Trenton 5
Weiner, Harold, Clifton. 5
Willets, S., Bloomfield. 5

NEW YORK STATE

Berke, Regina, Sea Cliff 1
Ellenville Discussion Group, Ellenville 10
Foster, Mr. & Mrs. Harland, Morriston 10
Jalonack, Mr. & Mrs. J., Roslyn 5
Jewish Sisterhood of Woodburne 10
Neibund, R. H., Mahopac 5
Rosenberg, David, Niagara Falls 10
Salschutz, Estelle, Middle Village 1
Schaflander, M. G., N. Rochester 5
Schmubler, Eleanor, Mt. Vernon 5
Thompson, Mr. Q Mrs. Merel, Elmira 5
Wiedrick, Chas., Oswego. 5
Wineburgh, Mr. & Mrs. Morris, W. Utica..... 5
Winkelstein, P., Ceremovi 1

NEW MEXICO

Monat, Dr. S., Santa Fe. 10

OHIO

Kalwary, S., Cleveland. 1
Lazarus, Mrs. Robert, Columbus 25
Weinberg, Mr. & Mrs. Sanford, Cleveland 5

PENNSYLVANIA

Driggs, Arthur, Pittsburgh 1
Feldman, Milton, Phila... 1
Grastenfield, Rose, Pittsburgh 10
Hobe, J. P., Bethlehem. 2
Hyde, Harry, Jr., Drexel Hill 2
Jones, Wilson ., Phila.. 2
Kaufman, Esther, Phila.. 5
Ludwig, L. A. Co., Phila. 10
Rochman, B. R., Harrisburg 1
Rubin, Earl, Philadelphia 5

RHODE ISLAND

Hirsch, H. L., Co., Providence 2
Stahle, P. W., Westerly. 1

TENNESSEE

Duvinsky, S.-Sgt. and Mrs., Oak Ridge..... 2

TEXAS

Pace, Lou, Garland..... 2

WASHINGTON, D. C.

Davidow, Mr. & Mrs. B.. 2
Grusd, Edward E. 5
Green, Ruth 5

WISCONSIN

Setel, oanne, Madison... 15

NO ADDRESSES

Class 9 A-2 3
Class 66 L, Eastern Dist. High School 3
Class 7 B-6, J. H. School, PS 164 100
Cruel 1
Students Theological Seminary 3.55
Walker, Henry 5
Anonymous 1
Anonymous 2
Anonymous 30

Dr. Sigmund Friedman

Dr. Friedman Is New Director At Sydenham

Dr. Sigmund L. Friedman Held press conference Friday following his installation earlier in the week as the new executive director of Sydenham Hospital. He pledged to "safeguard the achievements which the hospital—the only interracial voluntary institution in the country—has made thus far in the social as well as the medical spheres."

The new director, who is 38 years old, succeeds David M. Dorin, whose contract was recently terminated after an uncompromising personality difference which developed between him and the hospital's board of directors.

Dr. Friedman returns to his native New York after having served the past three years as assistant director of Beth Israel Hospital, in newspaper's appeal to save the hospital.

Dr. Friedman assumes his new duties at Sydenham at the close of a successful fund raising campaign

They Also Helped Save Sydenham

The "Save Our Sydenham" Fund has reached $277,337. PM previously has printed 14,898 names of contributors, and here are additional ones. More names will be published subsequently.

MANHATTAN

A. C. M. of A. N. Y. Clothing Cutters Union. 200
Adler, Joseph 1
Allborn, Rita S. 2
Alberta Blouse Co. 25
Amal. Clothing Workers of America 150
A. Y. Comm. Chapter Louis B. DuMaine, YMCA 6.05
Baron, Herman 10
Bennett, Murray 5
Berlow, Irving, Inc. 25
Beyrn, Lucille 2
Brenner, Harold A. 10
Brodsky, Irving 25
Brown, Thomas E. 5
Carmalt, Elizabeth 3
Chester, Eugenia 1
Chomow, Jos. & Staff. ... 20
Class of Story Telling ... 5.25
Cohen, Max B. Editorial Dept. 1
Doubleday & Co. 40
Feltman, Lenore 2
French Press Inf. Serv.
Bl. Finley & Employes. 11
Fuerst, Wm. J., Jr. 50
Gilbert, M. B. 3
Gilden, Jerry, Specialties, Inc. 50
Greenberg, Samuel 5
Handal, V. B. & Brother. 25
Harrison, Seth 5
Horodas, Dr. B. Stuart. 15
Ind. Laundry Drivers, Local 324 50
Jerell Juniors 100
Klevert, Evelyn 5
Kobacker Stores, Inc. ... 35
Ladies Mutuality Society. 100
Linberg, Len 2
Meyers, L. 2
Nathan, Stern Young Folks League 8
Natl. Blouse Corp. 50
Olsen, Florence 2
Peristein Family 3
Peristein, Julius 5
Peterson, Bettina 10
The Polsky Foundation. 100
Roberts, C. S. 2
Rosenthal, Milton 2
Smith, C. 5
Sundry Supply Co. 3
Sussman, Paula 10
Szeiners, P. P., M-Sgt. Teaching & Supervisory Staff of PS 5, Manhattan Tandy Vertner W., Jr.. 5
Teitscher, Harry O. 75.50
Tinsley, Lula M. 5
Transkrit Corp. 10
Turner, Arabelle 2
Van Tuyl, Marcella L. ... 5
Veterans Administration, N. Fole Section 260
Vinmor Shoulder Pad Co. 15
Wachtel, Charles 10
Wagner, Geo. F., Co., Inc. 300
Waldman, Jean 1
Washington Irving H. S., Class Section No. 823.. 13
Watson, Esther A. 5
Waxelbaum, Essie 10
Way, Marjorie 1
Weill, Mr. & Mrs. L. C. 10
Weinblatt, Abe L. 10
Weiner, Henry 5
Weiner, Leslie E. 5
Weisntein, Samuel 5
White, Katharine B. 10
Wile, Mr. & Mrs. F. W., Jr., Metz, Herman N. ... 5
Winston, Irwin 25
Wolchin, Mrs. B. 5
Wynn, Dudley 10
Yankauer, Max 10
Yound Retoefi Ladies Soc. 50
Zuckerman, Moses 2

THE BRONX

A. V. C. Members, Bronx Chapter 1
Engel, Lorraine 1
Bierman, William 1
Goldsand, Mr. & Mrs. L. Heating Supply 5
Gottlieb, Abe 3
Guthrie, Fred 2
Iowe A. U. C. Members. 11
Kadish, Mildred 1
Kalman, Gertrude 1
Lipton, Michael 6.50
Moore, Harry L. 1
Naumoff, B. B. 3
Pokash, Sam 1
Rosenberg, Mr. & Mrs. S. 2
Rubenstein, Philip A. ... 2
Rubyn, Michael Alan 2
Schermer, Bella 1
Starer, Irving 1

BROOKLYN

Aptner, Mr. & Mrs. Wm. 3
Badish, Mrs. Adele 1
Belinsky, Mollie, Dottie 2
Bergman, Dora 5
Cantor, William 2
Club Roosevelt, Amer. Youth for Democracy 6
Duberstein, Wilbur 10
Eisen, Mr. & Mrs. I. H. 10
Getzleb, Sylvia 1
Gewirtz, Adele 5
Greenberg, Barbara R. ... 5
Hashinsky, Edward 5
Intercultural Council of Mark Twain Junior H.S. 96
Jacobson, Louis 10
Jaffrey, S. Y. 1
Krug, Mr. & Mrs. Theo. 2
Kutner, Helen 1
Lemberger, Sam 2
Lipton, Mr. & Mrs. D. ... 1
Messing, Harry 5
Michaels, Mr. & Mrs. A. 5
Phillips, Mrs. Dorothy .. 1
Priesa, Frieda 2
PS 186, Group of Teachers 26
Renzeth, Ferdinand 1
Robbins, Leonard 2
Rochwerg, Mrs. C. 1
Rosenman, R. 2
Rochenberd, Jack M. 1
Rubin, Harry 2
Runes, Mr. & Mrs. M. ... 2
Schlosser, Alvin H. 1
Schtierman, R. F. 1
S & H Plumbing & Heating Supply 5
Swete, Pauline 2
Zucker, Saul, MD & Wejnstein, Jerome, MD 10

LONG ISLAND—QUEENS

Adelson, Herman 10
Cohen, Herb & Beatrice. 1
Doonor, Philip B. 2
Eisenberg, Walter A. 5
Elgart, Ruth M. 2
Flatow, Richard S. 1
Heller, M. 1
Inkeles 3
Miller, Barbara J. 8
Jacobs, Joseph 8
Moss, Susanne 3
Sheris, Albert 1

RICHMOND

Friedland, Jacob 5
Ladies Aux., Richmond Boro Post No. 80, Jewish War Vet. 11
O'Connor, Mrs. Katherine. 25
Parish, Jocelyn & Susan 5
Richmond Hill Square Club, Inc. 10
Shulman, Florence K. 1
Stone, Mrs. J. C. 5
Weiss glass G. S. D. Corp. 25

ALABAMA

Anderson, Alfred F. 1
Tuskegee Institute 5
Cohen, Irving, Mobile.... 1
Kaufman, L., Montgomery 10

CALIFORNIA

James, Bert, Long Beach. 5

COLORADO

Berner, A., Colorado Spa. 5
Frees, Anna M., Denver.. 1
Klarer, Ralph, Spivak.... 2

CONNECTICUT

Lalld, E. R., Bridgeport 2
Phi Sigma Sigma Socy., Beta Epsilon Chapter, Storrs 15
Samuels, Mr. & Mrs. A. New Haven 1

ILLINOIS

Greene, Carla, Chicago.. 1
Meadow, L. L., Chicago. 2.25
Morris, Harry, Chicago. 100
Schaffner, Carol, Chicago. 1

INDIANA

Butler, Mrs. D., Columbus 1

IOWA

Gordon, Rabbi & Mrs., Sioux City 2

MASSACHUSETTS

Ginsberg, R., Springfield 1
Press, Jos., Framingham. 1

Toledo Hospital Adds 2 Negro Nurses, Dietitian

21c Chicago Defender. Lee. 10-18-47

TOLEDO, Ohio — (ANP) — Two Negro nurses last week were added to the staff of the Maumee Valley Hospital. They are Miss Anna Kendrick and Miss Helen Ballard, both last June graduates of No. 2 General Hospital, Kansas City, Mo. Sat.

Miss Vivian Powell, dietitian from the Wayne Diagonistician Hospital, Detroit, also has joined the staff of the hospital.

The new additions bring to three the number of Negroes on the nursing staff at Maumee Valley, which formerly had no Negroes in professional positions. All placements were made through the industrial relations department of the Frederick Douglass Community Association, headed by John F. Perdue.

Miss Kendrick is the daughter of Mr. and Mrs. Charles Kendrick, Topeka, Kans., and Miss Ballard, the daughter of Mr. and Mrs. Walter W. Ballard, Toledo.

21c 1947

Oklahoma

Oil Wells of White Couple To Aid Race

Sat. 8-9-47

By Associated Negro Press

SOUTHPAW, Okla.—Fifteen ushing oil wells on the prop-ty of a local white Methodist inister have made his dream me true on a vow he and his ife took last year to build a egro hospital if ever they ob-ined the necessary funds.

The Rev. and Mrs. Perry C. cArthur were reported last eek to be quietly studying ans for a 50-bed all-Negro hos-tal here as oil continued to ush forth on their property in ie East Cookie Town field, hree miles south and four west Walters on West Cache creek. he first oil well on the McAr-ur farm began producing last eb. 12.

OWED TO BUILD 8/9/47

But the white couple took the ow to build a Negro hospital during July, 1946, when a Ne-gro school teacher was criti-cally injured at Grandfield. No nearby hospital facilities were available for her and she could not be moved a great distance. Only the aid of friends and her church associates made possible her long and difficult recovery.

The hospital, which Rev. and Mrs. McArthur estimate will cost about half of their income from the wells as of now, will also house a nurse training school. They plan to turn both over to the Methodist curch for opera-tion, they revealed.

21c 1947

Tennessee

Open 50-Bed Hospital In Chattanooga, Tenn.

Chicago Ill. (21c)
Defender

CHATTANOOGA, Tenn.—(ANP)—The opening of the Carver Memorial Hospital as a city-and-county-owned institution for private patients of Negro doctors was announced here last week.

Established in a 40-year-old building, the hospital has 50 beds and will provide facilities for all local Negro doctors. Sat. 7-19-47

21d 1947

Kenny Worker Marjorie Wells of Minneapolis, only Negro Kenny technician in the world, shown above with one of her patients, flew in from the midwest yesterday to aid the Negro Committee of the eastern area campaign for the Sister Elizabeth Kenny Foundation, which seeks $75,000 to found a Kenny Institute in New York.

21d 1947

'47 March Of Dimes Campaign Opens Wed.

21d World Memphis, Tenn.

Fri. 1-10-47

The 1947 March of Dimes, spark plug of the never-ceasing battle against infantile paralysis, will be held January 15th to 30th, it was announced by Basil O'Connor, President of the National Foundation for Infantile Paralysis.

The need for funds, Mr. O'Connor said, has never been greater since the nation has just emerged from the worst epidemic of infantile paralysis in the history of the National Foundation, the organization founded in 1938 to spearhead and co-ordinate the battle against this disease.

"United States Public Health Service figures show," said Mr. O'Connor, "that the 1946 polio epidemic is second only in severity to the great spidemic of 1916, which was the worst in recorded history. This means that not only was the Foundation called upon as never before to supply expensive equipment, personnel and every other aid known to modern science to the stricken, but it is still being called upon to assist those who have not yet acheived maximum recovery. And there are more of these than there have ever been before."

"The National Foundation also spent muhons of dollars during 1946 in medical scientific research to find the cause of infantile paralysis," Mr. O'Connor went on. "It will continue to do so, until that cause is discovered and rendered harmless.

21d World

"The National Foundation also intends to go ahead with renewed vigor with its far-reaching educational program to inform the public what precautions it may take to avoid the disease; what to do if and when polio strikes, and what the National Foundation is prepared to do for every American, regardless of age, creed, color or race, who is stricken by the dread crippler — and that is to provide the best available care, ragardless of cost, until maximum recovery is assured. Memphis, Tenn.

"The American people," Mr. O'Connor went on, "have been most generous in the past in supporting the fight against infantile paralysis through the March of Dimes. Indications are that they will be even more generous this year because they know that this fight is their fight. They realize that the March of Dimes is the best insurance they can obtain against polio — and that the battle will go on in the laboratory until final victory is won and infantile paralysis joins the other great scourges of mankind which have been unmasked and disarmed by Knowledge.

Fri. 1-17

"The annual March of Dimes," Mr. O'Connor concluded, "is the only means the National Foundation has for financing its battle against infantile paralysis."

The Deep South Speaks

The views expressed in this column do not necessarily express the editorial opinion of The Louisiana Weekly.

21d Louisiana Weekly

By Robert Durr,

For the NNPA News Service

New Orleans, La.

Racists have continually harped upon the fact that colored people do not assume and execute civic responsibilities on a par with white people. It is important that colored people grasp every opportunity to assume and carry out their civic responsibilities. It, therefore, is heartening to learn that Phi Delta Kappa Sorority, in cooperation with the Federation of Women's Clubs, is this year sponsoring the "March of Dimes" as a regional project.

Sat. 1-18-47

Soror Larnie Williams, Southern regional director, says:

"No infantile patient shall go without the best available medical care for lack of funds, regardless of age, race, creed or color."

With this pledge from the National Foundation for Infantile Paralysis as our guaranty, and a keen awareness of the fundamental rights to bear the responsibility as well as share the benefits from community project which contribute to the solution of persistent problems of life, colored people everywhere welcome this opportunity to join in the March of Dimes campaign.

This being one of the movements about which so little is know generally, our first concern is that of making available to all of the people answers to such questions as these:

1. What is the program of the National Foundation for Infantile Paralysis?
2. How are the campaigns directed?
3. Do colored people receive any service from the Foundation?
4. Have colored people contributed to the program as fully as they are capable? If not, why not?

Let us begin our attempt to answer these questions by stating that the 1947 campaign is the first in which colored people in some sections have had an opportunity to participate as an integrated, organized unit in the drive. The Foundation leaders are to be commended for their procedure in the promotions of such a project, for certainly the health of all of the citizens is the concern of all of the citizens.

The National Foundation for Infantile Paralysis was founded in 1938 by the late Franklin Delano Roosevelt to "lead, direct and unify" the fight against polio and is dedicated to the battle until science wipes out the disease as a threat to humanity.

The National Fonndation is supported by funds raised during the annual March of Dimes campaigns held each year in late January by the March of Dimes only. The 1947 March of Dimes will be held from January 15 to 30.

The National Foundation functions mainly through its local chapters, organized by counties throughout the United States. Each county chapter keeps half of the March of Dimes money it raises to pay for transportation, hospitalization, treatment and medical care of any person in the county stricken with the disease, regardless of age, color, creed or race.

21d

Colored patients receive treatment in hospitals located in every state in the nation. The National Foundation allotted $200,000 in 1946 to the Tuskegee Institute Infantile Paralysis Center.

Colored hospitals in Tennessee, Florida, Illinois and Missouri have received appropriations from the National Foundation to equip special services related to infantile parlysis. Tuskegee Institute has received $433,236.69 for the building and equipping of the Tuskegee Infantile Parlysis Center.

21d Sat. 1-18-47

The Tuskegee Center was recognized in 1939 when the National Foundation made its first grant to Tuskegee after the need for such an institution became apparent. There was no scientific evidence that colored people were not as susceptible to infantile paralysis as members of other races. Nowhere had accurate statistics been compiled or clinical studies made to determine whether the disease attacked all races similarly. Furthermore, there was a shortage of trained colored medical specialists. The center offered at least a beginning to the solution of these problems.

The Tuskegee Center was established as an aftercare center, not as a hospital for communicable diseases into which infantile paralysis patients traditionally go for the first weeks of their illness. But the year the center opened, an epidemic of infantile paralysis broke out in Alabama. It was necessary to accommodate victims without delay and even to add six beds to the twenty-four that had been the capacity of the unit.

The daily visible improvement in these patients brought into the hospital in the early stages of the disease was such that the cry from doctors and nurses was, "If we could only get them early." Though still primarily a hospital for after-care, the center admits enough nearby cases in the acute stage to insure that professional workers going out from Tuskegee will have a wide knowledge of early technique for minimizing crippling.

21d

One hundred and one persons, chiefly children, hospitalized at the center in four years, seem pitifully few in a nation which, in the one year of 1944, saw more than 19,000 new cases of infantile paralysis. The significance of the 101, however, does not lie in their number. Other facts must be considered.

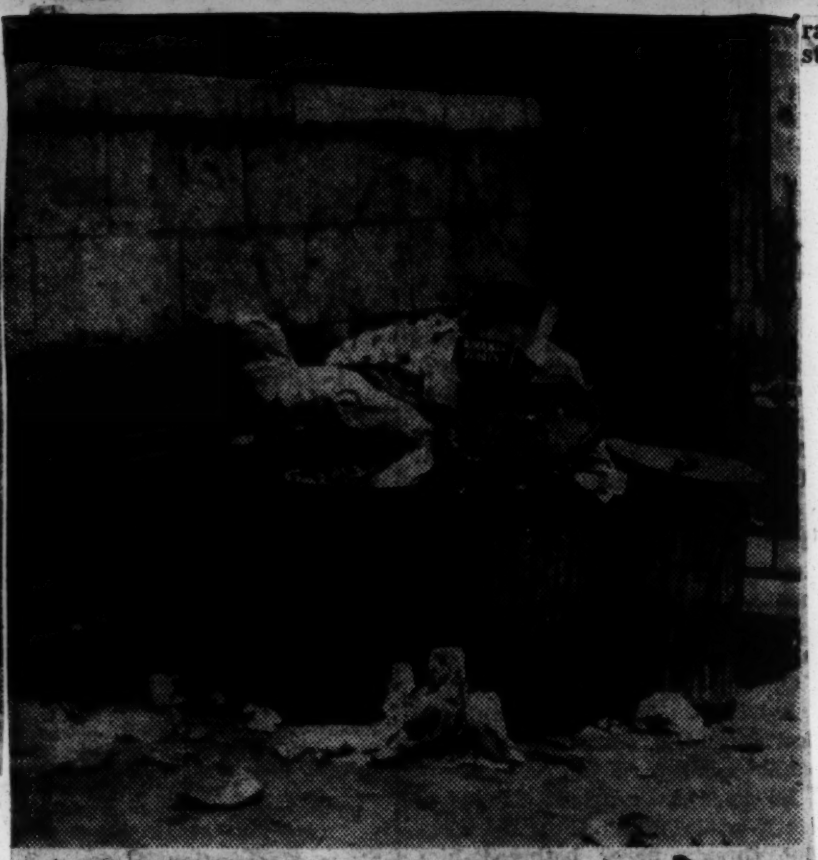
Sat. 1-18-47

They were served by a staff of one doctor, seven nurses and two physical therapists until recently when the staff was reduced by two nurses and one physical therapist. This handful of colored specialists had acquired invaluable experience in the care of infantile paralysis patients, forms a nucleus for spreading knowledge.

Give not until it hurts—but give because others are hurting!

Wed. Daily Worker N.Y. N.Y. 7-30-47

. . . The children play, ignoring the stench and the danger nearby.



As garbage festers on Osborne St. . . . Daily W

Garbage, Flies, Kids--and Polio

Daily Worker Wed. 7-30-47

210 New York N.Y.

By Louise Mitchell

LOOK AT THESE pictures. City kids playing in garbage-filled streets; the sun broiling the refuse till it becomes a rotten, festering mess of filth. Nothing new, you may say. That's true. But this time it's somewhat worse.

Since the war garbage collections in New York City have been cut down to a three-day weekly schedule. This economy was instituted during the war. Only in business areas and in neighborhoods with huge apartment houses are collections on a four-day basis.

Where garbage is collected Monday, Wednesday and Friday, refuse piles on the streets from Saturday through Monday, and Thursday and Saturday, the waste hangs around from Sunday to Tuesday a fine repast for a fly with evil intentions.

And there are such flies, everywhere in the city.

New evidence has been brought forward that the filth fly is a carrier of infantile paralysis. Dr. Robert Ward, speaking at the recent Fifth International Congress of Pediatrics pointed out that one of the carriers of the disease might very well be the filth fly—the large sized variety found on piles of garbage and excrement. Even the curbing of dogs doesn't seem to diminish the flies' appetite. Wed. 7-30-47

Already the newspapers have reported a death from polio. In Westchester County a 10-year-old girl contracted the dread disease on Saturday and died on Tuesday. The item was a reminder that infantile paralysis takes no vacation during the hot months.

In fact, this is the time of the year when it strikes hardest. Whether it will assume epidemic proportions, in these days of atomic wonders, is still left to the angels.

The Department of Health yesterday told the Daily Worker that garbage collection was strictly the concern of the Department of Sanitation. It is only after children or adults come down with paralysis that the Health Department steps in.

Over $200,000 Awarded for Special Study of Polio

210 Afro-American Baltimore, Md. Sat. 10-4-47

Infantile Paralysis Foundation Gives $60,000 to Tuskegee; Meharry, Chicago Medice Benefit

NEW YORK—In an effort to increase the opportunities of colored persons who are handicapped in obtaining training for the treatment of polio, the National Foundation for Infantile Paralysis here on Sept. 25 announced the award of special grants to several schools and hospitals.

The largest amount awarded for one single purpose was the $60,000 given Tuskegee Institute for the training of student nurses.

However, a total of $67,670 was given to Meharry Medical College, effective as of July 1 past. The sum included $41,840 for instruction in pediatrics; $16,200 in orthopedic surgery, and $9,630 to provide the teaching program in physical medicine. 10-4-47

A $50,000 grant, also effective as of July 1, was given the Provident (Hospital) Medical Association of Chicago "(for the purpose of providing fellowships in orthopedic surgery, pediatrics and neurology for colored physicians."

In announcing the sepecial grants, Charles H. Bynum, director of international activities for the foundation, said that they did not represent any deviation from the organization's policy which forbids any kind of discrimination.

In explanining the foundation's policy, Mr. Bynum pointed out that the Cook County (Ill.) chapter used on its March of Dimes poster for 1947 the picture of a colored child, 5-years-old Rita Reed, who made exception progress in recovery from polio in a hospital in the State. Sat. 10-4-47

He also stated that members of the group being benefited are aided by local chapters of the fund, especially in the South.

Other institutions receiving funds were North Carolina College, $8,800 to train teachers, supervisors and co-ordinators of health education, and Duke University School of Medicine, $2,400 to provide a clinical supervisor at Lincoln Hospital in Durham.

In addition to the special grants, it was revealed, Knickerbocker Hospital here was given $30,866 for the first of a series of training and treatment centers, and several individuals were awarded scholarships through the U.S. Public Health Service and the National Research Council, Washington.

Dr. Tobias to Aid March of Dimes

Afro-American Baltimore, Md.

NEW YORK—Dr. Channing H. Tobias, director of the Phelps-Stokes Fund, is chairman of the Harlem River Front Committee of the National Foundation for Infatile Paralysis, Inc., according to Mrs. Thelma B. Boozer, director of the area 1948 March of Dimes campaign. Sat 11-1-47

The area office is again located on the second floor of L. M. Blumstein, Inc., 230 W. 125th St. Volunteers are needed now. Members of the executive committee attended an organizational meeting last Monday in the Public Liberary, 104 W. 136 St.

Tobias Statement

Dr. Tobias said he accepted chairmanship of the campaign in the Harlem Area because of the late President Franklin D. Roosevelt and because the chief polio victims are children.

"It is discouraging for children who look hopefully into the future to continue to be faced with the possibility of becoming over night a victim of this dread disease. "Present statistics are encouraging, but it is still a long seige warfare rather than a brief battle," he stated.

2Id 1947

March of Dimes

BIRMINGHAM NEWS

White and Negro leaders from 10 states met at Tuskegee last week to develop campaign procedures and techniques for the 1948 March of Dimes to be conducted Jan. 15 to 30. 319 (21 2)

Negro participants included Merl Eppse of Nashville; Mrs. Larnie J. Williams of Birmingham; George L. Washington of Columbia, Miss., and Mrs. Fannie Ponder of St. Petersburg, Fla. 11-30-47

Highlight of the conference was the banquet address of Miss Sallie Lucas Jean, director of health education for the national foundation

N. C. State Hears DuBois In Address

Daily World

Atlanta, Ga.

DURHAM, N. C.—The address of Dr. W. E. B. DuBois Friday afternoon at the North Carolina College for Negroes was a scholarly treatise on Russia, its history and government, combined with a comparison of the capitalistic and communistic forms of government.

In his introduction, the noted historian and author expressed that his interest in Russia dates back over a half century when he first read stories of cruelty connected with the banishment of Russians to Siberia, long before the Russian Revolution and the establishment of the Soviet Republic. 2-15-47

"This is a question which students ought to have explained to them," he said. "Today the mere mention of the word Russia turns most people into a state of excitement. Most audiences would arrange themselves immediately on sides of a controversy that belts the world. Now this may be a good sign, indicating interest in a great state and people who are playing a decisive part in the world's history. But on the other hand, what we have to fear, is that this indicates that persons without opportunity to know, or without seeking information are taking sides on a question, which they do not understand."

Describes Russia

He prefaced his address with a description of the Russia that he saw on his epoch-making visits there in 1928 and 1936. He added to this an outline of Russian history. Commenting on the latter he observed, "All this is not a pretty picture; strife and bloodshed and suffering are splashed all over it.

"In every historical epoch," he said, "the prevailing mode of economic production and exchange, and the social organization necessarily following from it, form the basis upon which is built up the political and intellectual history of that epoch." Sat. 2-15-47

In pointing out Russia's more favorable points, Dr. DuBois stated that illiteracy has been almost wiped out in modern Russia. The mass of the peasants receive use of the land and machinery for tilling the soil. The working classes are receiving good wages. On the other hand, he explained, the standard of living is low. Political democracy is not as developed as in the United States, England or France, and the curtailment of free action is severe. He stated that in his own travels in Russia, he was struck by the hopefulness of the people who believe with religious fervor that communism is right and bound to succeed.

Poverty Pictured

Also on the unfavorable side of the ledger, he pointed to the tremendous amount of poverty and suffering. In striking contrast he told of the museums which are open to the people and the absence of unemployment.

It is Dr. DuBois' opinion that, "If in the United States and other parts of the world we succeed in keeping peace, in making modern industry work; in decreasing if not abolishing poverty, in doing a job of education equal to that done in Russia, and in other ways making the mass of people contented, happy, and even enthusiastic over their country, then we have no reason to fear Russia or its methods.

"Without doubt America and Western Europe have sought freedom, where freedom is impossible; while Russia seeks force and regimentation where there can be no progress without free enterprise."

Russia Is Wooing Dark Races, Logan Tells Texas Audience

20d Afro-American Sat. 6-28-47

Baltimore, Md.

AUSTIN, Tex.—(ANP)—In an address before the Texas Institute of Interracial Relations at the University of Texas here recently, Dr Rayford Logan, Howard University professor, author, and noted historian, warned that Russia is wooing "the darker nations of the world in anticipation of another war.

He said that in the battle of ideologies now raging, Russia, at present, has the advantage over the United States—calling attention to the millions of dark peoples, the failure of democratic nations to improve their condition during the years under their trusteeship.

"Russia is telling them that an alliance with her is their only hope for the future," Dr. Logan asserted, "and the blocs which are formed among democratic nations in the UN when votes are cast on matters affecting minority groups, are convincing these groups that Russia is right." Sat. 6-28-47

WAYMAN RUDD shown discussing point in theatrical technique with unidentified fellow student in the State Institute of Theatrical Arts in Moscow.

"OTHELLO" IN MOSCOW

20d Rudd

Rudd First to Play Role in Soviet Union Theatre

Afro-American Baltimore, Md.

Sat. 6-21-47

NEW YORK—A dispatch from Moscow received here last week told of Wayland Rudd, former American actor, now a Soviet citizen, as appearing in the Shakespearean play, "Othello."

Rudd, who left the State about 16 years ago to study theatrical production at the State Institute of Theatrical Arts in Moscow, is the first colored actor to play the role in the Soviet Union.

Critics attending the opening performance, June 9, reported that he handled the Russian lines creditably.

Native of Colorado

Rudd, a native of Colorado, spent much of his early life in New York, Washington, D.C., and Philadelphia.

He is a graduate of Dunbar High School and studied music at Howard University—both in Washington. He is an ex-newspaperman and at one time aspired to the concert stage.

In Philadelphia, Rudd was picked up in 1928 by Jasper Deeter, founder and director of the Hedgerow Theatre (near Media) Sat. 6-21-47 and appeared in the theatre's "Emperor Jones" and the lead role in "Othello."

Was Resident Member

He later became a resident member of the theatre because of his superior acting.

Deeter took him to Stockbridge, Mass., in 1930, where he appeared in "Emperor Jones."

Leopold Stokowski was in the audience at this performance and invited Rudd to act as narrator in "Oedipus," an opera, with Rudd accepting. Sat. 6-21-47

Interested in Russia

Interested in the Russian theatre, he went to Russia around 1931, having returned once on a visit.

His last contact with the Hedgerow was in 1945, when he wrote for information on securing production rights to "Deep Are the Roots," then playing in Philadelphia.

Ira Aldridge first played "Othello" between 1853 and 1858 in Dublin and London, and Paul Robeson essayed the same role in London in 1930.

Rudd is the son of a housekeeper of a former governor of Colorado.

Russian-Speaking Negro Actor Plays Othello in USSR

Daily Worker New York, N.Y.

MOSCOW, July 3.—A middle-aged Negro who came to the Soviet Union from the United States 15 years ago today is playing Othello in the Stanislavsky theatre presentation of Shakespeare's tragedy here.

When Wayland Rudd opened in the play this month, he became the first Russian-speaking Negro to appear in the role.

His performance won praise from directors and critics. Answering

Has appeared in a version of Tom Sawyer and is now rehearsing, along with his Othello appearance, the leading role in **Deep Are The Roots**, the American play on the readjustment problems of a returning Negro war veteran, faced with race prejudice. Fri. 7-4-47

Soviet troops at the front during

Rudd sang and acted to entertain

ROGERS SAYS:

Word Battle Between Russia And USA Will Result in Good for Each Country

The Courier, Pittsburgh, Pa. 2nd

By J. A. ROGERS

(The views expressed in this column are those of the writer and do not necessarily express the editorial opinion of The Pittsburgh Courier.—The Editors.)

Sat. 11-8-47

HISTORY continues to spring its surprises, one present one being very disillusioning. Who would have believed that the immense sacrifices made by both Russia and the United States in the last war would degenerate into a mudslinging contest between the two.

Mr. Rogers

The bone of contention is what they fought Hitler for, namely, control of Western Europe. America hopes to win it by gifts and bribes of food; Russia by promise of creating a workers' heaven on earth. In this name-calling much of what is being said on both sides is true. Gorbatov only repeated most of what Mr. Truman's opponents here had said about him. As for Stalin the American press had been calling him names long before Truman's time. In fairness it must be said that the Americans began the name-calling, that is, in 1917, when the Russians ducked out of World War I, leaving the Allies holding the bag.

I see, however, eventual good as a result of this wordy clash, good for Russia and good for America. Space will not permit my going into details so I will name but one good on each side.

Sat. 11-1-47

FIRST, RUSSIA is a dictatorship. It's a joke when UN delegates call it a democracy. It is centuries behind America in this respect and America is not a democracy. Russia is a police state in which less than a tenth of its people have any say. Russians were not free under the Czars; they are not so now. However. I am positive that Vishinsky, Molotov, Gromyko and others think a lot better of the United States than they dare say in their speeches. Like politicans, preachers and leaders in general they must talk for their crowd or face a heave-ho. What they are seeing here is bound to have some good for the future of Russia. Instead of barring Russians I'd let more and yet more of them come in to see the good aspects of American life even though they continue to condemn them. Russia, the largest and potentially richest country on earth, has benefitted greatly by American industrial and scentific methods.

Courier,

The present Russian dictatorship is sure to crack up, sooner or later. You can't sit forever on the human mind. The Czars couldn't sit on the Russian mind and the Communists won't be able to either. A more liberal regime will eventually emerge, one that will become more friendly with America. As for war there is no early prospect of that. Russia is too exhausted now. Besides she fears America's military might and with good cause. Stalin once admitted that American lend-lease material, was, with the exception of Russian valor, doing most for victory.

Pittsburgh, Pa.

ON THE AMERICAN side, much of what the Russians are saying against us is true and is making all but our fanatics take stock of themselves. I think that criticism, even when unjust, can be used by the wise for self-improvement. For instance, the Russians think America's trumpeting about her democracy is monstrous, barefaced hypocrisy, what with 14,000,000 of her citizens thrown into a despised, exploited caste because of the accident of color. Russians, for centuries, have been very fair and kind to black people.

Their greatest poet, their greatest spokesman for freedom, Pushkin's great-grandfather, an unmixed Sudanese Negro, and an ex-slave, rose to be tutor to Peter the Great's heir and later commander-in-chief of the Russian Army, this at a time when the biggest job held by a Negro of that capability in America was a butler.

Sat. 11-1-47

I can name at least a dozen Negroes who held Government posts in Russia that would be undreamed in "democratic" America. Today with all the Aframerican's education he does not hold even a third-rate job in his Government.

The biggest political job ever held by a known Negro in America was acting-Governor of Louisiana. Russia, in its respect and fairplay to humanity in a dark skin, is centuries ahead on the United States. Her attack on America for the treatment of her colored citizens has spurred many Americans to action against that treatment. I hope it keeps up.

Sat. 11-1-47

One more thought: Those who do not think in stock terms and phrases will discern something more than a clash for supremacy between Russia and the USA. They will see a struggle between two ideologies, that is, between the capitalistic - theological "democratic"—lands and socialism which began centuries ago with leaders as Saint-Simon, Robert Owen, Proudhon, Fourier, Lassalle, Marx, Engels and others. The socialist doctrine in spite of bitter opposition from capitalism and the Church has been seeping into almost every land since. It gained great impetus in the Russian Revolution of 1917 and Russia's victory over Hitler. And it looks like an eventual world winner unless its opponents stop such injustices as jim crow in America, the most inhuman robbery of black South Africans, and an Australia for whites only.

21d 1947 Warm Springs

Negroes Witness FDR Memorial Dedication

Atlanta, Ga. Daily World

Thurs. 6-26-47 21d

By OZEIL F. WOOLCOCK

WARM SPRINGS, Ga.—(SNS)—When we approached Warm Springs, Georgia Wednesday there were patriotic buntings and flags decorating the highway with signs that said "Welcome Visitors to Warm Springs." We passed Georgia Hall thinking all the time that part of the ceremony of the 20th Anniversary of the Founding of Georgia Warm Springs Foundation and dedication of the Little White House would be held there. Instead, we proceeded directly to the little White House that was nestled in the clearing of Georgia pine woods, an ideal place for complete solitude and rest.

We were greeted with a misting rain that threatened to move the crowd to Georgia Hall. But a slight let up made it possible for the ceremony to be held out of doors as arranged, with seating arrangement facing the front of the white cottage where the late president spent many restful days. It was surrounded by flags of the nations with the polio patients and invited dignitaries seated on the lower terrace.

Among a maize of national network hook-ups, news cameramen and reporters, the program went on the air with music by the mixed Fort Benning Military Band.

Josephus Daniels, former Secretary of the Navy, stated in his speech that the task was not to dedicate a shrine but to rededicate ourselves.

Basil O'Connor, president, Georgia Warm Springs Foundation, spoke at length of the late President Roosevelt. He told the audience that, 'It is here that he is most alive. He brought courage to hundreds like him and in the tranquility of this Little White House, he found courage when the tide had turned against him." He then presented the deeds to the White House to Governor M. E. Thompson. 21d

A message from President Truman was read. Thurs. 6-26-47

Before and after the formal program, Mrs. Lizzie McDuffie, long-time personal attendant in the Roosevelt household, and whose late husband, Irwin McDuffie, was personal attendant to the president, could be seen acting in the role of hostess on the interior of the cottage, where hundreds viewed the shrine. There was an inscription in the cottage kitchen that told the short story that Mrs. Daisy Bonner, the late president's Negro cook had prepared the first and last meal in the cottage.

Dignitaries from all over the country and representatives from many countries were introduced and on hand to dedicate the shrine in commemoration of its founder.

A dedication would not have been complete without the presence of Graham Jackson, favorite musician of President Roosevelt. Graham was by no means a stranger to the large gathering. He was seated on the improvised speakers' platform. The two favorite numbers of the president that Graham played were Going Home and Home On The Range on his prized accordian. He asked the audience to stand on the last number because he knew that the president would want it that way.

Among the specially invited guests to the dedication was J. E. Mitchell, Publisher of the St. Louis Argus, who accompanied us down to Warm Springs. Thur. 6-26-47

Mr. Mitchell is one of the 1944 presidential electors. W. A. Campbell, of Tuskegee was also a guest.

Ivan Allen Sr., of Atlanta and head of the Roosevelt Warm Springs Memorial Commission, suggested a peace tower to be built by funds from the forty-eight states. The tower would be on a mountain called Dowdell's Knob that was purchased by the late president.

The bronze plaque, telling the meaning of Warm Springs was unveiled by Michael Francis Doyle, chairman 1944 Electoral College.

The program ended about 5:15 p. m. Everyone left seemingly with a new inspiration to carry on the great fight against polio.

TWO TAKE PART

Roosevelt Shrine Is Dedicated

The Informer 21d

Houston, Texas

Sat. 7-12-47

WARM SPRINGS, Ga.—(ANP)—Negroes played a varied role at the dedication last week of the Little White House Shrine of the late Franklin D. Roosevelt.

Graham W. Jackson, outstanding musician and favorite of the late Mr. Roosevelt played "Going Home" and "Home on the Range" on his prized accordian.

Mrs. Lizzie McDuffie, long-time personal attendant in the Roosevelt household, acted in the role of hostess on the interior of the cottage, where hundreds viewed the shrine. There was an inscription in the cottage kitchen that told the short story that Mrs. Daisy Bonner, the late President's cook, had prepared the first and last meal in the cottage.

Sat. 7-12-47

Among the invited guests were J. E. Mitchell, publisher of the St. Louis Argus, and W. A. Campbell, of Tuskegee Institute.

21e 1947

Famed Psychiatrist Debunks Concepts on Racial Neurosis

(21e) Afro-American
Baltimore, Md, 12-6-47

NEW YORK—"Colored people are no more happy-go-lucky—or neurotic—than other people, and their mental troubles, though aggravated by their underprivileged status, are essentially no different from those of wealthy white people." Sat,

These are the findings of Dr. Frederic Wertham, famed psychiatrist and former professor at Johns Hopkins Hospital, Baltimore, who, with the help of colored friend, and without financial backing, launched the impressive Lafargue Clinic in the basement of St. Philip's Episcopal Church in Harlem 21 months ago.

Dr. Wertham said "the only difference is that in Harlem the trouble is much more naked and obvious . . . What the colored man needs, and what psychiatry must help him find, is the will to survive in a hostile world."

Negro Death Rate High

Although the death rate among the Negro population of the United States has declined in recent decades, it is still 37 per cent higher than that for white persons, statisticians of the Metropolitan Life Insurance report. The difference in the death rate is largest in adolescence and early adult life. Between the ages of 15 and 19 the mortality for Negro boys is nearly twice that for whites, while for Negro girls between the ages of 15 and 24 the ratio is more than three to one.

By Albert Deutsch

Fewer Americans Die, More Live Longer, Health Survey Shows

Well, there's at least one optimistic piece of news to report—the latest figures indicate that less Americans are dying and more are living longer than ever before. The Metropolitan Life Insurance Co.'s *Statistical Bulletin* notes a remarkably low death rate for the first quarter of 1947 among its policyholders. About 7.7 persons per 1000 in the U.S.A. died in this period, nearly 10 per cent less than the death rate for the same period of 1946 (a heavy influenza and pneumonia year) and 3.3 per cent less than in 1945.

Deutsch

The same *Bulletin* reveals that the average length of life among Americans hit the new high of nearly 66 years for 1945, the latest year for which figures are available. This means that two years and three months were added to the average expectation of life at birth, as compared with the immediate pre-war period of 1939-41. The average length of life in the U.S.A. has increased one-third since the beginning of this century, when it was 49 years and eight months.

Death Rate Reduced In All Groups

The improved death rate for early 1947 was shared generally by all of its insured groups, Metropolitan reports in its survey. The relatively low incidence of respiratory diseases during this period was an important factor in the general reduction; deaths from influenza and pneumonia were less than two-thirds the number recorded for the same months of 1946.

But there were lower rates, too, from other important diseases tuberculosis, the communicable diseases of childhood, syphilis, diabetes and appendicitis.

"Altogether," the Metropolitan reports, "the mortality record for this year is extremely favorable. Barring any serious setback, 1947 will probably take its place in the long series of years which have established new minimum death rates. The American people are gathering the harvest of successful labors of medical science and public health administration."

Women Live Longer Than Men, Whites Longer Than Negroes

The female of the species still reign as the hardier sex; it holds on to life from three to five years longer than the male, on the average. A newborn white female baby can expect to life 69½ years—only six months this side of the Biblical three-score-and-ten. The average white male has a life expectancy of 64.44 years.

The disadvantaged social and economic conditions under which Negro Americans live are tragically reflected in the longevity figures. Negroes of both sexes have a strikingly lower life expectancy than their white fellow-Americans. Negro males, at birth, can expect to live 56 years; the expectancy for Negro females is 59.62 years. These figures are, respectively eight and a third years and 10 years less than the corresponding figures for whites.

Life expectancy for Negroes, in other words, is now at about the place it was for whites 25 years ago.

There is one big optimistic note, however, even in the rate for Negroes. The average Negro male born in 1900, for instance, could expect to live only 32½ years; the average female, 35 years. The improvement since then has been far higher for Negroes than for whites—23½ years added for Negro males and 24½ years for Negro females.

"These remarkable increases of expectation of life at birth for both white and colored persons," says the Metropolitan *Bulletin*, are the result, very largely, of lives saved by the control of infections which in years past took a heavy toll of children and of young adults."

The gain in increased life expectancy narrows down with advanced age.

Anyway, it looks as if we're living longer, on the average. The question now on the floor is: Are we living better?

LITTLE DECLINE IN NEGRO MOTHERS' DEATH RATE

WASHINGTON, D. C. — While 98 percent of the births of white children are attended by physicians, four out of every 10 Negro babies are born without medical attention, this fact, among others, accounting for the fact that the decrease in deaths from childbirth among Negro mothers is 9 percent less than it is among white mothers.

These facts were issued recently by the Children's Bureau of the Federal Security Agency, which said its most recent figures give the death rate at childbirth for white mothers as 19.8 per 10,000 live births; and for colored mothers as 50.6.

As for infant mortality, Negro babies die almost twice as frequently as white.

Syphilis causes 13 times more deaths among them than among whites; tuberculosis five times.

Death from congenital malformations was the only gro[up] in which Negro babies had a [lower] death rate than whites.

tality rates among white mothers than among colored mothers, the report pointed out that the reduction in infant mortality rate was 1.6 per cent for white infants and double that figure (3.5 per cent) for colored infants.

The five leading causes of infant deaths were premature birth, pneumonia and influenza, congenital malformations, injury at birth, diarrehea, enteritis, the Bureau said.

Syphillis caused thrteen times more deaths among colored infants than among white babies, the report said. Death from tuberculosis was five times more frequent among colored babies than among white ones.

Death from congenital malformations was one of the few groups in which colored babies had a definitely lower death rate than whites.

Medical Aid Lacking

Commenting on the fact that there were twice as many still births per thousand live births among colored infants as there were among white children, the report said 98 per cent of the births of white children were attended by a physician while four out of every ten colored babies were born without medical attention.

Birth Deaths Remain High

WASHINGTON

Although the number of white mothers dying from childbirth decreased 10 per cent between 1943 and 1944 the decrease for colored mothers was less than one per cent for the same period, the Children's Bureau of the Federal Security Agency reported, Friday.

The Bureau said in its monthly journal that while the death rate at childbirth for white mothers was 18.9 per 10,000 live births, for colored mothers it was 50.6 or nearly three times as high.

The report quoted an authority who commented on the figures by saying: Obstetric care has undergone an evolution in this generation, but colored citizens have not participated fully in the benefits of modern obstetrics. It is not possible to have two systems of maternal welfare; there must be one all-inclusive health program."

Infant Mortality Lowered

While greater gains were made in the reduction of maternal mor-

21g 1947

National Negro Health Week

State Medical Officer Asks Wide Support Of Negro Health Week

Birmingham, Ala. Post 3-31-47

BY DR. D. G. GILL
State Health Officer
(Written for The Associated Press)

In the interest of the health of all our people we beg all our citizens to take an active part in making National Negro Health Week in 1947, the greatest success in its history. There cannot be a really true community health if some of our people are untaught and unresponsive to the laws of health and the official, scientific appeals for a general and total observance of the laws of health for the individuals and for the public at large.

Your Alabama state health officer, with 100 per cent support of his associates, hereby most fervently appeals to all communities, and to every citizen, white or colored, young or old, and to all these we say: Birmingham, Ala.

Incorporate into the full observance of National Negro Health Week every agency, group program, and facility, everything that might aid in raising the level of the health of the Negro people. This will automatically do the same for the whole community.

We hereby issue another call to all chambers of commerce, trade unions, civic clubs, literary and social clubs, welfare agencies, local public health departments, representatives of state and federal agencies, teachers, clergymen, physicians, dentists, sanitarians, nurses and all other of our public-minded citizens, to play the largest possible part this year in leading, improving and educating the whole community where these are located. 3-31-47

The greatest authority on matters pertaining to our highest interest—the Bible, has long told us all—"When one member suffers, all the members suffer with it." Each unhealthy person, as well as each unhealthy family, is a focal point of infection and constant danger to all the people of the whole community.

We are sure that the above plan of action will give the greatest promise of success in our observance of National Negro Health Week. The News, Miss.

NATIONAL NEGRO HEALTH WEEK

Beginning March 31 and closing Monday, April 6, was National Negro Health Week. 21g

National Negro Health Week was founded in 1915 by Booker T. Washington, in order to stress the health needs of his race and to encourage the Negro to take advantage of existing health facilities in his community. Since 1932, however, this Health Week has been a part of a year-round program of the United States Public Health Service.

Last year, 10,500 communities in 36 states participated in a National Negro Health Week that stressed "a healhy home in a healthy community." The emphasis this year is on the responsibility of the citizens and local agencies and organizations in making a better and healthier community.

Jeffersonville, Ga., New Era
April 10, 1947

The Negro has shared in Georgia's health progress. Both colored and white mortality rates have declined. In 1910 the colored rates for deaths in the United States from all causes were approximately 50 per cent higher than white rates, while in 1944, they were less than 33 1-3 per cent higher.

However, the Negro still suffers more than his due share of ill health and premature death. One and two-thirds more Negro babies die in the first year of life than do white infants. Twice as many Negro mothers die of childbirth as do white mothers. The Negro rate for tuberculosis still is more than three times that of the white and he Negro rate for syphilis is more than 5 times that of the white race.

Tifton, Ga., Gazette
April 4, 1947

Last week was National Negro Health Week, although little attention seems to have been paid to it. Bunt it is time we were giving more consideration to the negro's physical well-being, not only for their well-being but because disease and illness among the negroes have a direction bearing upon our continued good health. An insurance company points out that the death rate for the negro population, despite pronounced improvement during the past few decades, still is 37 per cent higher than for white people in this country. Too, the difference in the death rates for the two races is greatest in adolescence and early adult life. Life insurance statisticians see in the higher negro death rate a reflection of the heavier toll taken by such leading causes of death as tuberculosis and syphilis. "The progress achieved so far is encouraging," the life insurance company says, "but the negro still faces many health problems of major proportions. Much is yet to be done in reducing their excessive toll of preventable disease and premature death." And it might have been added that the white people are going to have to help if the negro's health problems are to be solved, and this is true especially in the South.

A Generation Behind

21g

"The average length of a Negro's life in the South at present is 35 years. It should be 50 years. . . ." Time 4-7-47 mgn.

This modest hope was expressed 32 years ago by the late Booker T. Washington. As medicos this week marked the 33rd annual observance of Booker Washington's "National Negro Health Week," his wish had come true: today the life expectancy of U.S. Negroes (North & South) is 57 years. Chicago, Ill.

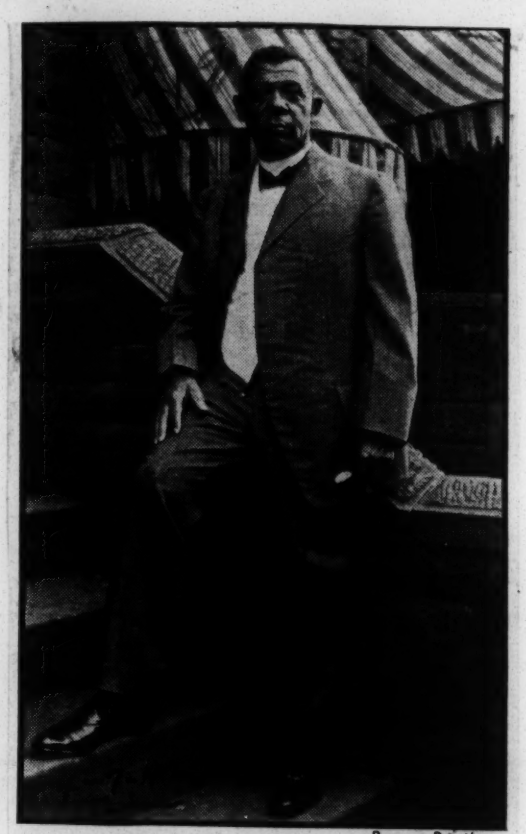
But the U.S. Public Health Service, taking its annual inventory, found little reason for complacency. Negro health still lags a full generation behind that of U.S. whites (life expectancy: 66 years). Items:

¶ The death rate of Negroes is 33% higher than that of whites; the Negro infant death rate is 63% higher.

¶ Most of the major killers—tuberculosis, kidney disease, pneumonia—are far more prevalent among Negroes. Heart disease and cancer are the killers that cause a higher percentage of deaths among whites; but the cancer rate among Negroes is rising.

¶ Kept out of many hospitals, Negroes have only 124 hospitals of their own (many of them substandard), with a total of 20,800 beds (national total: 1,700,000 beds). Time 21g 4-7-47-mgn. Chicago, Ill.

¶ There are some 3,800 Negro physicians—one for every 3,377 Negroes, as against one doctor for every 750 persons in the general U.S. population. In the past decade, while the Negro population rose 8%, the number of Negro doctors dropped 5%.



Brown Brothers

BOOKER T. WASHINGTON
A wish come true.

Origin 21g Defender

NEGRO HEALTH WEEK was originated in Tuskegee Institute in 1916. At first confined to the area directly influenced by the school it gradually spread and by the 1930s was being sponsored as now by Dr. Roscoe Brown's office in the U. S. Public Health Service. Chicago, Ill.

It is interesting to note that this idea originated by colored citizens and primarily intended for colored citizens, has spread across racial lines. Many communities and areas sponsor "Health Weeks" now with no reference to race.

In Washington, where the campaign is on at this writing, it is known as "Clean-Up Week." Householders are at first urged through the press and radio to clean up their premises and collect backyard and alley rubbish in containers so that city refuse trucks can haul it to the dumps, and if the urging is not heeded, police action follows.

Launch Health Week By Giving 1,508 Blood Tests

Chicago Defender 21g
Chicago Ill.
Sat. 4-19-47

GREENWOOD, Miss.—This city celebrated National Negro Health Week, giving 1,508 persons blood tests, and initiating a campaign against social diseases.

Sponsored by the Greenwood Negro Civic League, a 10-man team was employed from the U.S. Public Health Service. According to a government representative in Leflore County, who acted as consultant during the program, the number of tests here is believed to have set a national record.

A city-wide clean-up campaign was also launched, stressing clean alleys, yards, parkways and streets.

Kentucky Negro Nurses Admitted To American Nurses Association

Courier, Pittsburgh, Pa.
Sat. 11-8-47

NEW YORK—According to a recent announcement from the national headquarters of the National Association of Colored Graduate Nurses, Negro graduate nurses in the State of Kentucky may now enjoy full and e qual membership in the Kentucky State Association of Registered Nurse

The decision to drop discriminatory barriers was made in Louisville at the annual convention of the Kentucky State Association earlier this month. A representative attended the Negro Nurses Convention in Bowling Green, Ky., according to Miss Marion A. Sprague, executive secretary of the Kentucky Association.

WAGED CAMPAIGN

This action makes possible the admission of Negro nurses of Kentucky into the American Nurses Association, largest professional nurses organization in the Nation. Admission to ANA can be obtained through its States affiliates. It is for this reason that the National Association of Colored Graduate Nurses have waged a ceaseless campaign to break down barriers to State nurses associations holding membership in the ANA.

Membership in ANA is seen as removal of many barriers that handicap Negro nurses, both economically and professionally, and is an advantage to the community which she serves. The ANA has consistently worked for reasonable hours, fair salaries, satisfactory living conditions and adequate vacation allowances for nurses. It also demands high standards of nursing, legal recognition of, and regulation of the practice of nursing.

DROPPED BARRIERS

Since the end of the war, five of the fourteen State organizations of professional nurses that discriminated against Negro membership have dropped their barriers. In Missouri, one district of the State organization has admitted Negro nurses.

Sat. 11-8-47

As a New York delegate to the meeting of the House of Delegates of the American Nurses Association in Chicago this month, Alma Vessells R. N., executive secretary of the National Association of Colored Graduate Nurses, presented a resolution and made a strong appeal for all States to act to end discrimination. At the same meeting of the powerful body of ANA, Tennessee sent a Negro nurse as its delegate. This gesture was unprecedented in Southern representation. Seven Negro delegates from various States attended the confab.

The National Association of Colored Graduate Nurses was founded in 1908 by a few far-seeing nurses because existing national nursing organizations assumed no direct responsibility to meet the problems of discrimination in education, opportunities for service and unequal rates of pay. Their aim is attainment of full professional status for every Negro nurse in America.

8,000 Nurses in U. S., Many More Needed

• By ALVIN B. WHITE

EVER since Mary Mahoney graduated from that Boston school of nursing back in 1877, there has been a shortage of nurses of her race.

Today, 8,000 colored women are registered nurses and 4,000 are in the 65 schools which accept students of both races, training for this humanitarian profession.

Of these 65 schools, 38 are mixed institutions where race is no bar.

Nurses from the 27 other schools have won recognition throughout the country and are accepted everywhere.

New York Sets Pace

Although there are 1,300 schools of nursing in the United States, colored nursing students are accepted in white institutions only in the states of California, Connecticut, Illinois, Indiana, Massachusetts, Minnesota, New Jersey, New York, Ohio, and Pennsylvania. Even in these states, not every white institution admits them.

War played an important part in liberalizing racial policies for nurses. In New York City, 26 voluntary hospitals threw their doors open for the first time and all of the 28 municipal hospitals now have interracial nursing staffs, whereas all except four were lily-white before the war. A total of 1,000 colored nurses are now employed in New York's hospitals.

New York is one of the few spots where nurses are used on an integrated basis in Veterans Administration hospitals. Veterans had a definite policy on this—based on local practices—which was promulgated a year or so ago in Philadelphia.

1,100 in Public Health

All except 1,100 of the [illegible] nurses in the important field of public health nursing in the United States are white. About 530 of the 1,100 are employed in 17 Southern States.

Mississippi, which has a colored population of nearly a million souls, has three public health nurses—one to every 333,000 persons! Best estimates allow one public health nurse for every 2,500 persons.

Again the war brought colored wrangling and debate, a War Department quota of 56 was set. At the end of the war, there were 530 in the service, one of whom was a major. Nine were captains. All others had commissions as first and second lieutenants.

2,000 Cadet Nurses Trained

Navy bent over backward and commissioned four as ensigns, but they were given short duty, stationed in Boston, New York and at Annapolis.

Over 2,000 cadet nurses were trained during the war, but this was far below the number actually needed to service the nearly 14,000,000 colored Americans.

Each nursing school may be identified by the cap the nurse wears. There is a difference—it may be the way a ribbon is attached, it may be the kind of frill, it may be the bonnet itself—but to the initiated, the cap indicates which school the wearer is from.

Cap a Symbol

With 1300 different schools, medical administrators have to be up on their protocol or else they insult these angels of mercy.

In Mississippi there are only three public health nurses, like this one shown on duty in a New York public school. That means only one nurse to every 333,000 persons. But since 1877, our nurses have exceeded 8,000 mark. More are still needed, especially in rural and Southern areas.

No matter what the school, the course is prescribed and to be able to write RN after her name, a nurse first has to pass a State examination.

So, after all, the cap merely signifies that the nurse has graduated from school—and until she completes her course, she has to dress in the blue ginghams that undergraduate nurses wear.

When all of the work is completed, then she can graduate to the lovely white dresses and cap, the trademarks of her profession.

The following Schools of Nursing train colored only:

ALABAMA
Tuskegee Institute.

DISTRICT OF COLUMBIA
Freedmen's Hospital.

FLORIDA
Brewster Hospital, Jacksonville; Florida A. and M. College, Tallahassee.

GEORGIA
Grady Hospital, Atlanta; University Hospital, Lamar School, Augusta; City Hospital, Atlanta.

ILLINOIS
Provident Hospital, Chicago.

LOUISIANA
Dillard University New Orleans.

MARYLAND
Provident Hospital, Baltimore.

MISSOURI
Homer G. Phillips Hospital, St. Louis; St. Mary's Infirmary, St. Louis.

NEW YORK
Harlem Hospital, New York; Lincoln Hospital, New York.

NORTH CAROLINA
Good Samaritan Hostipal, Charlotte; Lincoln Hospital, Durham; L. Richardson Memorial Hospital, Greensboro; St. Agnes Hospital, Raleigh; Community Hospital, Wilmington; Kate Bitting Reynolds Hospital, Winston-Salem.

PENNSYLVANIA
Mercy Hospital, Philadelphia.

SOUTH CAROLINA
Columbia Hospital, Columbia.

TENNESSEE
Meharry Medical School, Nashville.

TEXAS
Prairie View State College Hospital, Prairie View.

VIRGINIA
Dixie Hospital, Hampton; Hampton Institute, Hampton; St. Philip Hospital, Richmond.

The following schools admit students of all races:

CALIFORNIA
Los Angeles County General Hospital, Highland School, Highland Amameda County Hospital, Oakland; University of California School of Nursing, San Francisco.

CONNECTICUT
St. Francis Hospital, Hartford; Yale University Hospital, New Haven; Joseph Lawrence School, New London; William W. Backus Hospital, Norwich; Stamford Hospital, Stamford; University of Connecicut, Storrs.

ILLINOIS
Cook County Hospital, Chicago.

INDIANA
Indianapolis City Hospital, Indianapolis.

MASSACHUSETTS
Boston City Hospital, Massachusetts General Hospital, Massachusetts Memorial Hospital, New England Baptist Hospital, New England Hospital for Women and Children, Peter Bent Brigham Hospital, Simmons College School of Nursing, Boston; Cambridge City Hospital, Cambridge Hospital, Cambridge; McLean Hospital, Waverly.

MINNESOTA
University of Minnesota Hospital, Minneapolis.

NEW JERSEY
Jersey City Medical Center.

NEW YORK
Fordham Hospital, Brooklyn State Hospital, Cumberland Hospital, Kings County Hospital, Brooklyn; Pilgrim State Hospital, Brentwood; Edward J. Meyer Memorial Hospital, Buffalo; Flushing Hospital, Flushing; Bellevue Hospital, Metropolitan Hospital, New York Post Graduate Hospital, Presbyterian Hospital, New York; Grasslands Hospital, Valhalla.

OHIO
City Hospital of Cleveland.

PENNSYLVANIA
Philadelphia General Hospital; University of Pittsburgh School of Nursing.

Oklahoma Bans Nursing Bias

NEW YORK (ANP)—The Oklahoma Nurses Association at its annual convention in Lawton, Okla. Oct. 30, voted to admit qualified colored nurses to full membership for the first time.

Colored nurses representing

nual meeting, admit-bership have removed their bar-urses to full mem-riers. The other State organiza-Oklahoma Nurses tions are Florida, Delaware, Mary ake the fourth such land. Tennessee and Kentucky. o take this step with-f a year's time. Since e war, seven of the sing associates that d nurses from mem-

Only Nurse Of Race On Hospital Staff

Mrs. Roberta Vaughan Griffin has recently been assigned to the nursing staff of St. Mary's Hospital in Clarksburg, W. Va. She is the first and only colored nurse to be assigned. Mrs. Griffin is a graduate of Lincoln Hospital, Durham, N. C. Prior to this assignment she served on the staff of the hospital at Tuskegee, Ala. Nurse Griffin is the daughter of Mr. and Mrs. Lincoln Allev Vaughan of Rich Square, N. C.

Dark Angels

ALMA VESSELLS, executive secretary of National Assocation of Colored Graduate Nurses, has been appointed to Board of Directors of National Association for Practical Nurse Education. She served there in '44 and '45, but its still a first, being the only national nursing organization with a colored board member. Another first: four Negro Senior Cadet Nurses are studying at Cornell U. hospital in Ithaca, N. Y. They're from Meharry Med. College. Also at Cornell is a Negro grad nurse taking a post-grad course in psychiatric nursing.

Incidentally, the Colored Graduate Nurses have been waging one helluva unsung battle and have finally cut down to ten, the number of states barring Negro nurses from membership in their associations. The Kentucky State Association of Registered Nurses and the Oklahoma Nurses Association have just voted to admit qualified Negro nurses. Nice going, nurses! And oh yes, one of the four Negro officers in the Navy is a nurse, Ensign Edith DeVoe.

In Washington, Providence hospital, affiliated with Catholic University of America, admitted two colored student nurses, Cecelia Christopher and Mildred Anderson.

21h 1947 General

Harlem Kids

Daily Worker

By John Hudson Jones

Her secret love are the children of Harlem, and when the tonsil waiting lists in the clinics were five years long she fought until they were reduced to 10 days. As chairman of the Harlem Unity of the Nurses Association she was active in the struggle that won an eight-hour work day for New York nurses. Her exposure of unsanitary conditions in the Harlem Hospital operating room led to their removal. At present, the Harlem Communist Party Trade Union Director, she will be the only woman speaker at the Madison Square Garden Lenin Memorial Meeting, Jan. 22.

Rose Gaulden, the shy, unassuming Negro woman whose list of services to New York and Harlem is a dozen times as long as the short one above. Daily 1-21-47

At first she was a little shy at being "interviewed." Maybe it was just the formality of the idea, because anyone who has heard her strong clear voice ringing out against the enemies of the Negro people at either 125 St. and Seventh Ave. or 38 St. and Seventh knows she is definitely not bashful.

Rose, as everyone calls her, is a large woman, with a winsome smile after a few preliminary questions the "interview" really warmed up to a jolly good time.

From which one of her many activities had she gotten the most satisfaction? The answer was quick and enthusiastic. New York, N.Y.

"I think I got most enjoyment out of my little part in helping to break down discrimination against the Negro nurses in the armed forces during the war."

It was at the height of the war. All of the services were making urgent radio appeals for more nurses. But when Negro graduate nurses applied the number accepted was limited. Daily 1-21-47

In Harlem she organized the Joint Committee of Nurses and began the fight which was later taken up and successfully fought by the Association of Colored Graduate Nurses.

And how about her early work as a Harlem Hospital nurse?

"Oh that's a long, long story, but I guess you can say I helped form the hospital's first union local in 1934." Daily Worker

Well when did she join the Party, and why?

ROSE GAULDEN
To Speak at Lenin Rally

"In 1935." She smiled a little smile of reminiscence, and there was a moment's pause. "Well, joining the Party was the sum total of everything I believed in and wanted to fight for."

A little forgotten item—when and where was she born?

"Thomasville, Georgia, period!"

And what about the Talmadge-Arnall fight raging there now?

"That would require a whole speech, but in a word it shows that reaction dies hard, and the Party in the South has a tough struggle ahead." Daily 1-21-47

Just as she got up to go, another little forgotten item. What would her Lenin Memorial speech be about?

"Suppose we let it be a surprise. But I'll promise you this," she smiled, "it's going to be short and sweet!" New York, N.Y.

And we knew from experience that even a teeny speech from Rose Gaulden would pack a terrific punch.

500 Nurses in Biennial Meet

211 Afro-American Baltimore, Md.

ATLANTA (ANP) — Upwards of 500 nurses, representing 8,000 members of their profession, converged on Atlanta last week for the biennial convention.

Mayor William B. Hartsfield extended official welcome in behalf of the city, in an elaborate welcome program. Sat. 6-28-47

Mrs. Edmonia Grant, assistant administrator, Southern Conference for Human Welfare, told the nurses that "we who survived the rigors of World War II are on the threshold of a new era in human relationships. Today we must abandon competition between racial and nationality groups in the United States and secure their cooperation as a central fact of national affairs as the way to provide for the peace within our country." Sat. 6-28-47

Mrs. Grant stated that significant gains in democratizing the schools have been made, and revealed that another frontier in inter-gorup relations is the organization of white and colored people in the South in the Southern Conference for Human Welfare to promote the general welfare and to improve the social, economic, political, cultural and spiritual conditions of the people of the South, regardless of race, color, creed or national origin.

Few Colored Nurses in Vet Hospitals

Pittsburgh, Pa. Courier 2-8-47 Sat.

WASHINGTON — (ANP)—The need for nurses by the Veterans Administration has reached a crucial point, but not crucial enough to remove measures prohibiting the wider use of colored nurses.

There are some colored nurses in veterans' hospitals, but in widely scattered places. They are accepted in only six of the more than 100 Veterans Administration hospitals.

Colored nurses are at Kecoughtan and Roanoke, Va.; Tuskegee, Waco, Tex.; Fort Bayard, New Mexico, and the Bronx hospital in New York. Sat. 2-8-47

Although VA says: "In conformity with the established policy of the Veterans Administration, there is no discrimination based on race, color or creed in the employment of nurses for the department of medicine and surgery" it leaves the path clear for discriminatory practices. Discrimination and segregation are rampant in VA hospitals.

Progress Greater in '46 than Anticipated by Group

Afro-American Baltimore, Md. 1-18-47 Sat.

Employment Level, New Jobs, Unions' Attitudes Contribute to Advancement, Report Discloses

NEW YORK—While 400,000 non-white workers were unemployed during 1946 and racial discrimination in employment remains widespread in America, significant advances have been made in a number of job fields, according to a year-end statement released by the National Urban League.

"Although it was feared that unemployment of colored workers would reach 1,000,000," Julius A. Thomas, the league's industrial relations director, stated, the employment level has held remarkably well during the first year of peace. 1-18-47 Sat.

Many Factors Contribute

Other factors contributing to the progress, he said, were the successful experience of many large companies which employed colored workers for the first time during the war, trade unions' attempts to outlaw discrimination and the enactment and implementation of FEPC legislation in several States.

In its efforts to open new and better jobs for workers, the National Urban League met with more success in 1946 than in any previous year, the director reported.

Virgin Opportunities

The league succeeded in placing "firsts" in a wide range of new jobs in 50 cities scattered throughout the country. Among these were:

Switchboard operators, clerks, stenographers, installers, coin collectors and technicians, who were placed in jobs with telephone companies in Detroit, Minneapolis, Boston, Providence, Milwaukee, San Francisco and Newark.

In New York and New Jersey, 500 switchboard operators and workers in other classifications were added to the telephone work force. The companies had employed 152,000 persons since V-J Day, of whom less than 1,500 were not white.

Bias Still Flagrant

Despite the initial success in breaking down unfair practices by the telephone companies in these areas, most telephone company operating units still are guilty of flagrant discrimination, Mr. Thomas emphasized.

In other white collar fields, considerable gains were brought about in the employment of sales people, clerks, and cashiers in department stores, insurance companies, and other establishments, notably in New York, New Jersey, Massachusetts, Michigan, Pennsylvania and Wisconsin.

South Major Problem

These favorable trends are most pronounced in Northern States, however, tre report pointed out, and progress in the South remains stymied by continued adherence to traditional caste patterns.

In Atlanta, Memphis, and Richmond, the telephone management despite the obviously urgent need for linesmen and skilled construction workers, stubbornly has refused to employ qualified colored veterans.

Pattern of Communities

Large companies now establishing new plants in the South are taking the position that they cannot "buck" local racial employment patterns.

But the league's program in the South is being strengthened for a renewed attack on discrimination, and the union organizing drives are viewed as a strong asset in the fight.

It was recalled that the 1946 National Urban League Conference voted unanimous support to the current Southern organizing campaigns of the democratic unions.

Vets' Service Disgrace

Despite investigations and recommendations from numerous organizations and individuals following release of the league's special veterans' survey earlier in the year, little actually has been done to improve services, the report revealed. 1-18-47 Sat.

In city after city, veterans comprise the majority of unemployed non-whites in the employment service's active files.

In some cities, veterans already have exhausted their adjustment allowances and are being forced to accept ill-paid jobs as janitors, porters and laborers.

Encouraging Aspects

A few feeble attempts are being made in several cities to expand vocational training, apprenticeship and on-the-job-training for veterans, according to the league.

Almost 20,000 veterans are taking advantage of opportunities for advanced education, but an estimated 15,000 have been unable to enter any college due to crowded conditions, the report revealed.

VA Discrimination Hit

Continued discrimination by the Veterans' Administration, itself, is responsible for much of the general lethargy in regard to the problems of veterans, the league pointed out.

Although some 700,000 non-white veterans are natives or Southern and border States, less than 200 of them are employed by the Veterans' Administration in those areas.

In Georgia, for instance, only seven of the 1,700 of VA employes are not white, and in the rest of the South, the average VA employment is about six persons per State.

Further, the veterans who are employed are restricted largely to segregated counseling centers in segregated colleges.

Stronger Efforts Needed

"These facts demonstrate all too clearly that the challenge to the Urban League movement is by no means diminished, and that we must continue our appeasement with us, and we must use all our resources our long experience in community organization has developed to hold and increase our gains," the report pointed out.

"But co-operation does not mean down the line," he pointed out.

"In the National Urban League calls for interracial and inter-group co-operation all

Osborne-Riddle Marriage Told

The Chicago Defender

NEW YORK (ANP)—Mrs. Estelle Massey Riddle became the bride of Herman Osborne, insurance broker, in a quiet ceremony here, last week.

The bride was attended by her sister, Mrs. Cora Sparks of Harlem Library staff, and the bridegroom by his father. The couple are now honeymooning in Massachusetts. Sat. 7-12-47

Mrs. Osborne has established herself in the field of nursing and is well known in St. Louis and other points west where she was formerly on the teaching staff at Homer G. Phillips Hospital. During the war the health expert pioneered in placing colored nurses where they had never had entre and in raising the standards of schools of nursing. She has been a driving force in the National Association of Colored Graduate Nurses and heads the Alpha Kappa Alpha health project which has

MRS. HERMAN OSBORNE
recently established offices in New York. The former Estelle Massey Riddle was also the first colored nurse to be honored with a teaching post in the nursing education department by New York University. 4427-47-47

Atlanta Ga. Daily World

Tue. P. 2-47

MADAME PANDIT GETS RECOGNITION FOR NURSES CAMPAIGN —NEW YORK—Mrs. Vijaya Lakshmi Pandit, chairman of the India delegation to the United Nations, receives a bouquet of yellow roses from the National Association of Colored Graduate Nurses for her interest in their campaign to recruit young women into the nursing profession, and in recognition of her work for international peace and health. Award was made at Lake Success. From left: Jane Watson, student nurse, Anne Johnson, director, School of Nursing Kings County hosiptal; Alma Vessels, executive secretary of the NACGN; Mrs. Estelle Riddle Osborne, of NYU; Mrs. Pandit; Mrs. Emily K. Johnson of the National Comm. on Careers in Nursing; and Kathleen Terwilliger, student nurse—(Keystone Picture).

21h 1947

Nurse Training

Race Relations in the South

TO THE EDITOR OF THE NEW YORK TIMES:

As a plain ordinary citizen of the South, I think the picture of our race relations has been badly distorted in the news. The horrible Greenville, S. C., episode is no more typical of the South than the Valentine Day massacre of gangster days is typical of the Midwest or Murder, Inc., of New York.

The real picture of our normal race relations in the South certainly presents a more pleasant aspect. Just one little incident, here in Asheville, is evidence of this. It arises from a community-wide Junior Nurses' Aide training program here; a cooperative venture of the Community Welfare Council, the Y. W. C. A., the Girl Scouts, Norburn Hospital and Clinic, and other institutions. The training was done in Norburn Clinic classrooms.

New York, N.Y. Times

One of three groups of young women who received instruction through this program came from the Negro schools. Their training was received at the big Norburn Clinic under the direction of white teachers from St. Joseph's Hospital, Norburn and other institutions. They were trained, not for future service in the hospitals training them; but to relieve a shortage of nurses in the local colored hospital, and they were trained without cost to themselves or to the colored hospital. In all, nineteen graduated and received diplomas in impressive ceremonies, participated in by leading white and colored civic leaders, at the Phyllis Wheatley (colored) branch of the Y. W. C. A.

Tues. 8-12-47

These Negro girls will put their training to use as Nurses' Aides at the Asheville Colored Hospital. All are a credit to their race and to the cooperative planning of a community whose friendly race relations make such a program a normal community expression. ELLSWORTH LYMAN.

Asheville, N. C., June 16, 1947.

Macon, Ga., Telegraph
July 27. 7

Council to Get Proposal For Training Negro Nurses

By HANK DRANE

A well-organized plan for erection of a training school for Negro nurses at Macon Hospital that has been under way for some time and has the backing of a number of prominent Maconites, will be up for discussion and a possible vote when city council meets at its regular weekly session Tuesday afternoon.

William C. Turpin, Macon attorney and hospital commission chairman, is heading this group. Action on the proposal was slated following a letter to Mayor Charles L. Bowden in which Turpin said Negro student nurses would relieve the strain on the white nurses and eventually be able to take over the entire Negro work of the hospital, which is about 40 per cent of the whole.

In addition to this, he said such a school would result in a flow of trained, intelligent Negro girls to go back into the Negro community. They would inevitably raise the living standards and health conditions among Macon's Negro population, he added.

The group backing the project has estimated it will take at least $100,000. If the city could raise that amount, they were certain an additiaonal $50,000 would be allotted from federal funds, $3,000,000 of which were recently made available to Georgia for hospital construction under the Hill-Burton act.

Plans for the training school call for an expansion of the present Negro wards to add 24 beds and to build quarters for 40 Negro nurses as well as space for graduate nurses. This would include a study and recreation room.

Turpin said the hospital has a few Negro nurses at present, but not enough. Hospital authorities had told him "they would never be available until a training program is set up and living quarters made available to them," he said.

He emphasized the program had been tried and was working successfully in Atlanta, Savannah, Columbus and Augusta.

"We cannot hope to improve white health conditions very much," he said, "so long as the Negroes do not live in proper surroundings and with proper attention to hygiene.

"If such a school is started," he pointed out, "I am of the opinion it would be tremendously helpful in improving race relations in Macon.

"These relations are now good," he continued, "but unless we work continually toward that end, they will necessarily deteriorate as they have in a great many places."

Mayor Bowden expressed his approval of the letter by asserting he would push the project because he could think of nothing more beneficial to the general health of the city, and the improvement of race relations.

Comparatively Few Negroes Trained Nurses In Alabama

Advertiser, Montgomery, Alabama
Tue. 8-12-47

Out of the 2,500 trained nurses in Alabama only 415 are Negroes, Miss Annie Laurie Crawford, director of counselling and recruiting, Alabama Nurses Association, disclosed yesterday.

The AMA director explained that one factor bringing about the comparatively low ratio of Negro nurses is the lack of training facilities within the State.

"Tuskegee," Miss Crawford said, "is the only institution in Alabama which offers registered nurse training to Negroes who wish to enter the nursing profession. It, however, provides limited training facilities as compared to other schools, namely in several other Southern states. The unit at Tuskegee will only admit 20 student nurses each year."

Miss Crawford said that each year she received approximately 150 inquiries from Negroes regarding the possibility of entering nursing schools within the State, but that, due to the inadequacy of nurse training institutions in Alabama, she, in the majortiy of cases, was forced to refer the potential candidates to schools in neighboring states which offer nursing courses to Negroes on a larger scale than does Alabama.

Tue-8-12-47

"Because it is necessary to refer these applicants to out-of-state schools, Alabama loses many Negro nurses. When a nurse trains in a particular locality, it is very likely that she will settle in that locality rather than return home," Miss Crawford said.

The ANA director told of one particular Negro woman who has worked for the past two years so that she will be financially able to enter the Tuskegee School of Nursing in September.

"While the Tuskegee school requires a rather high enrollment fee," Miss Crawford added, "the institution affords each student an excellent education and provides them with the knowledge necessary to be a thoroughly competent and efficient member of the nursing profession."

Many times, Miss Crawford explained, young Negroes, who inquire as to entrance requirements of nursing schools, emphasize that they must obtain employment outside their school curriculum in order to provide enrollment fees and incidental expenses for themselves while in training.

"This, I think, is a creditable example of just how eager many of the Negro applicants are to become registered nurses, and Alabama should take steps in the future to provide them with the necessary training," Miss Crawford said. "What with 43 per cent of the State's population composed of Negroes, it stands to reason that there should be, at least, 43 per cent as many Negro nurses as there are others."

Meharry School of Nursing Listed by National League

Afro-American

NASHVILLE, Tenn.—Dr. M. Don Clawson, president of Meharry Medical College, has just announced that Meharry Medical College School of Nursing has been accredited by the Committee on the Administration of the Accrediting Program in the National League of Nursing Education.

The National League of Nursing Education was organized as an Association of Superintendents of Training Schools for nurses at the World's Fair in Chicago in 1893. Both as an Association of Superintendents and later as the National League of Nursing Education, this organization has been the most outstanding force in developing standards for nursing education and nursing service. The Committee on Accreditation has done much to accomplish these objectives.

Baltimore, Md.
Follows Study

The accreditation followed a careful study of the school by Miss Clara Quereau, the executive secretary of the committee. The announcement came from the league through the executive secretary of the committee on administration of the accrediting program.

2 Women Study Psychiatric Nursing At New York Hospital

PHILADELPHIA — The American Friends Service Committee announced here last week that Miss Henry is a graduate of the Naomi Henry, Baltimore, and Frederick Douglass High School, Winifred Turner, Norfolk, Va., course in practical nursing. For a have begun a three-year training time she worked as a nurses' aide course in psychiatric nursing at in the Harriett Lane Home for Rockland State Hospital Orange- Children, branch of Johns Hopkins burg, N. Y. Hospital.

Through Institutional Service Units, young men and women are given the opportunity of helping to the ISU group; as a result of the Institutional Service Units program, sponsored by the American Friends Service Committee in mental hospitals, and thereby increasing the chances of some patients recovering through better (Quakers).

Both spent last year working as attendants at the institution as part of the program, academic as well as practical training.

This is the first year that Negroes have been enrolled in the units. Units are also maintained in correctional institutions.

Before joining the Institutional nurses training course in Rockland State Hospital, Miss Turner was employed as a student at Talladega (Ala.) College. She graduated in June, 1946, with a bachelor of arts degree.

Miss Henry is a graduate of the Douglass High School, Frederick and Baltimore, and also completed a course in practical nursing. For a time she worked as a nurses' aide in the Harriett Lane Home for Children, branch of Johns Hopkins Hospital.

11-22-47

Service Units are year-round, and members may join at any time. In-Service Units. Miss Turner was a

Quakers Open Psychiatric Nursing Courses to Two

24, Afro-American, Baltimore, Md. Sat. 11-15-47

PHILADELPHIA — Miss Naomi Henry, 1930 McCulloh St., Baltimore, Md., and Miss Winifred Turner, 2700 Myrtle Ave., Norfolk, Va., have begun a three-year training course in psychiatric nursing at Rockland State Hospital, Orangeburg, N.Y.

Both girls spent last year working as attendants at the institution as part of the Institutional Service Units program, sponsored by the American Friends Service Committee.

This is the first year that colored students have been enrolled in the nurses training course in Rockland.

Before joining the Institutional Service Units, Miss Turner was a student at Talledega (Ala.) College. She graduated in June, 1946, with a bachelor of arts degree.

Miss Henry is a graduate of the Frederick Douglass High School, Baltimore, and also completed a course in practical nursing. For a time she worked as a nurses' aide in the Harriett Lane Home for Children, branch of Johns Hopkins Hospital.

HOUR OF CHARM TO HONOR BENNETT COLLEGE

GREENSBORO, N.C.—Phil Spitalny and his all-girl orchestra will dedicate there "Hymn of the Day" to the girls of Bennett College on Sunday, November 16, on it oprrgamssc R7l 8FIE JikHl its program broadcast over the Columbia Broadcasting System and will be heard at 4:30 p.m. Eastern Standard Time. Listeners in this area may hearthe program from station WBIG in this city.

21j 1947

DR. STUBBS, BRILLIANT YOUNG MEDIC, PASSES

21j World Memphis, Tenn.
Tues 2-18-47

NEW YORK— (ANP) — Doctor Frederick Douglass Stubbs of Philadelphia, one of the most brilliant surgeons produced within the group died of heart attack Saturday evening while traveling with his wife on a surburban train near here for Long Island to keep a dinner engagement. The Stubbs were spending the weekend in New York in attendance on , a meteing called by the National Urban League. Doctor Stubbs was apparently in his usual good health when the sudden attack came He and his wife were on their way to the Lester Grangers

Dr Stubbs was a native of Wilmington, Del, the son of the late Dr J B Stubbs and Mrs. Stubbs. He did his undergraduate college work at Dartmouth where he won a Phi Beta Kappa key and then took his medicine at Harvard Medcal school

He was the only man in his class to pass the National Medical board among the first ten Going to Philadelphia to practice he soon forged to the forefront of his profession He became superintendent of Douglass hospital and was almost equally active at Mercy hospital. He was also on the staffs of the Philadelphia General and Jefferson Medical School hospitals ,

Just a few weeks ago the announcement of his election as a fellow of the American College of surgeons was made He was also a member of the International College of Surgeons. He was a member of the Alpha Phi Alpha fraternity

Surviving are his wife, Mrs. Marion Turner Stubbs, two daughters Patrica and Fredericka his mother Mrs J B Stubbs of Wilmington and two sisters, Mrs Elizabeth Stubbs Davis of Chicago and Mrs Jean Stubbs Jamison of Wilmington

DR STUBBS WELL KNOWN

Dr Stubbs visited Memphis in the fall of 1941 to give a series of lectures and demonstrations at the Tubrculosis Clinic sponsored under auspices of Shelby County Tubrculosis Society He had been frequently consulted with by local health authorities in their campaign against tuberculosis among both Negroes and whites, because of his preeminence n this field

Fellowship

CHARLOTTESVILLE, Feb. 9—(AP)—Dr. Julian I. Gilliam, young Negro doctor of Roanoke, is the first to be granted a fellowship by the Virginia Cancer Foundation and is starting a year of postgraduate study at New York University where he will specialize in radiation therapy at Bellevue Hospital under Dr. Ira Kaplan.

Dr. James R. Cash, University of Virginia pathologist who is chairman of the Virginia Cancer Foundation's fellowship committee, in announcing the award to Dr. Gilliam explained that this was the first of a series of such grants to be made with the hope of providing better diagnosis and treatment for Virginians suffering from cancer. These fellowships for advanced medical study are open to both white and Negro doctors.

To Practice In State

After his year of specialization under Dr. Kaplan, who is director of the radiation therapy department at Bellevue, Dr. Gilliam will return to Virginia to practice.

Dr. Gilliam was one of three applicants recommended by Dr. L. C. Downink, director of Burrell Memorial Hospital in Roanoke, who is a member of the Virginia Cancer Foundation's executive committee.

The fellowship of the Virginia Cancer Foundation carries a stipend of $3,600 for the year. So interested are New York University authorities in this project to train young cancer specialists that they have remitted the fees usually charged for a year of postgraduate study.

Dr. Gilliam is a native of Roanoke and attended Addison High School there. He studied at Hampton Institute and at Lincoln University before taking up medicine at Howard University. After graduation he served the internship and assistant residency at the Provident Hospital in Baltimore.

Richmond, Va., Times-Dispatch
February 10, 1947

Dr. Gilliam Is Awarded

Dr. Calloway Made Assistant Professor In Medicine At I. U.

Daily World Atlanta, Ga.
21j Tue. 3-28-47

CHAMPAIGN, Ill.— (SNS) —In a new precedent-breaking move, the University of Illinois has announced the promotion of Dr. Calloway to the rank of Clinical Assistant Professor in Internal Medicine.

This marks a real milestone in medical education. Although there have been other cases in which Negroes have been appointed to medical school faculties, never has this teaching rank been achieved by a Negro that teaches on the wards and lectures to undergraduate and graduate students in clinical medicine. Daily World

Dr. N. O. Calloway directs an extensive program of research for the Navy on diagnoses and convalescence, he lectures to students, teaches on the wards and directs graduate student research.

Well Trained

He holds the Ph. D. as well as M. D. degree and he belongs to many scientific and honorary organizations. Atlanta, Ga.

Dr. Calloway has had an unusual career: at 25, he was a successful teacher of chemistry and research worker. He wrote many original articles for the scientific literature in theoretical chemistry. He became a referee for the Journal of the American Chemical Society, approving or rejecting their articles before publication. Some of his work was translated into several languages. Not yielding on his original plan, he went into medicine. Tue 3-28-47

Taught While Student

He had the unique distinction of teaching in the Medical School every year he was in Medical School, teaching in succession pharmocology, tropical medicine and endocrinology. He completed his work at Chicago University and the University of Illinois.

He spent nearly three years in the army on a special assignment studying the rate of recovery of wounded soldiers. For this work he directed a group of 18 doctors and nurses. Atlanta, Ga.

His life was recently dramatized by the Columbia Broadcasting System. Tue 3-28-47

FEW NEGROES LISTED IN MEDICAL SCHOOLS

21j Tue 3-25-47

During the twenty-five years between 1920 and 1945 fewer than fifty Negro physicians have been graduated from the five New York City medical schools, Dr. Viola W. Bernard reported last night at the meeting of the New York Chapter of the Physicians Forum in the New York Academy of Medicine.

"From the United States' annual output of 5,000 physicians," Dr. Bernard added, "only 130 are Negroes—of whom all but ten graduate from the two all-Negro medical schools. The significance is heightened by the fact that these conditions existed at the same time as organized medicine voiced great alarm at the threatened post-war shortage of physicians. 3-14-47

"The quota policy may be openly acknowledged or maintained sub rosa, but the existence of this practice has been fully demonstrated. Only about 7 per cent of all the Jewish applicants that apply to medical schools are admitted, and in the twentyyears between 1920 and 1940, the proportion of Jewish students to the other students in the five New York City medical schools decreased by 64 per cent, and throughout the United States by 50 per cent." 3-14-47

Third Doctor Gets Post With U. of Georgia

Los Angeles (ANP)—The third Negro physician to be accorded such honors here opened his offices last week. This was Dr. Roy Kingsley, who was appointed a school physician. The son of the Rev. Harold M. Kingsley, director of Pilgrim House, Dr. Kingsley served as a medical officer in World War II and is commanding officer of the medical corps unit of the Sixth Engineers Battalion, California National Guard.

A graduate of Meharry Medical College, the young physician completed his internship at Provident Hospital and a member of the Chicago Institute of Tuberculosis.

This invitation has come to these men in recognition of unusual medical work. Dr. Calloway has published several outstanding papers on metabolism of convalescence, and is engaged in studying the problems of aging. 4-4-47

Dr. Bryant has contributed notably to the studies of the chest, especially problems of tuberculosis.

The University of Georgia this week invited Dr. N. O. Calloway, 5751 Indiana ave., Chicago, and Dr. J. E. Bryant of Evanston, to conduct a series of lectures at the postgraduate short course given at that institution's medical school.

Dr. Calloway is an assistant professor of internal medicine at the University of Illinois. Dr. Bryant is an attending physician at Provident Hospital and a member of the Chicago Institute of Tuberculosis.

This invitation has come to these men in recognition of unusual medical work. Dr. Calloway has published several outstanding papers on metabolism of convalescence, and is engaged in studying the problems of aging. 4-4-47

Dr. Bryant has contributed notably to the studies of the chest, especially problems of tuberculosis.

Medics Asked To Lecture At

Chicago, Ill. Defender
Sat. 7-5-47

Negro Medical Students to Get Training At Waverly Hills

Mr. Courier-Journal
21j Louisville
Sat 4-5-47

To relieve the shortage of doctors in the Negro division of Waverly Hills Sanatorium, Meharry University Medical School, Nashville, has agreed to send the division six students each month for training.

Dr. Orville L. Ballard, division director, announced the first group will start Monday.

The shortage of Negro doctors exists not only at the sanatorium, but throughout the city, Dr. Ballard said. Louisville now has only about 25 Negro doctors, he said.

"We hope we can induce some of Meharry's students to establish their practice in Louisville when they finish school," Dr. Ballard said. "There's a crying need for at least twice as many Negro doctors as are here now."

Meharry students will also assist in the work at the Central Louisville Health Center at Beecher Terrace, he said.

As a further aid to the sanatorium, Dr. Ballard said, the university will send the Negro division a resident physician every three or four months.

The shortage of Negro doctors here, he said, has been caused by the scarcity of hospital facilities available to them. 4-5-47

Negro who became outstanding surgeon in Africa, returns home

Sat. 7-19-47

OMAHA, Neb.—Subject of a Reader's Digest article in 1942 because of the outstanding work he has been doing since 1930 in Angela, Portuguese W. Africa, Dr. Aaron M. McMillan, a medical missionary and surgeon, has resumed practice here after an 18-year-absence. Sat. 7-19-47

A former Nebraska state legislator, Dr. McMillan went to Africa for the Board of Foreign Missions of the Congregational church. Before going, he spent a year in Portugal, studying the language and taking a post-graduate course at the University of Lisbon and at the University of Paris

In Angela, Dr. McMillan established the 130-bed Willie F. Pierce Memorial hospital where, in treat-

Rare Operation Performis

Sat. 7-19-47

NEW BERN, N. C.—A successful operation was performed at Good Shepherd Hospital by Dr. John F. Burton on July 10, in the removing of a rare stone (about the size of a turkey egg) from the bladder of a male patient. It took three hours to perform the operation.

Dr. Burton is a native of Nashville, Tenn., a graduate of Meharry Medical College, and has practiced surgery in New Bern, since last June, 1946. Sat. 7-19-47

Your History

Dates Back Beyond the Cotton Fields in the South . . . Back Thousands of Years Before Christ

By J. A. Rogers

Illustrated by SAMUEL MILAI

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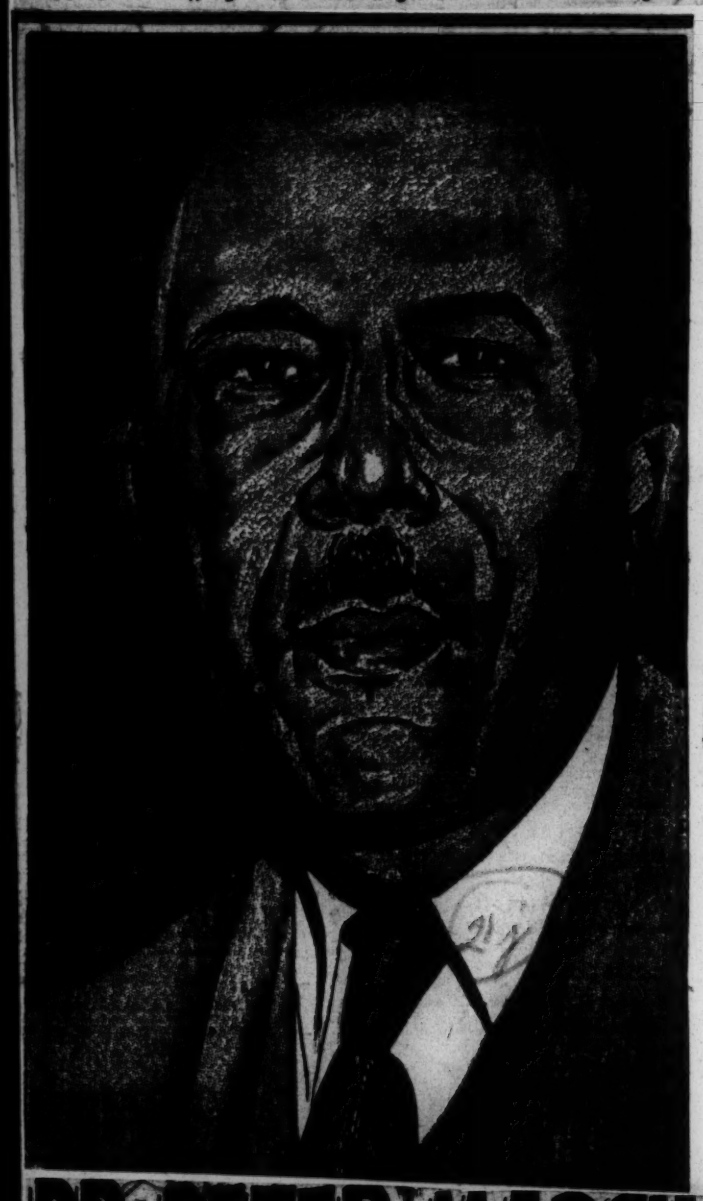

SURGEON — Dr. William M. Walker has passed the California State Board in surgery, and was the first Negro to complete post-grad training in surgery at the Los Angeles County General Hospital.

MEDICAL SAMARITAN:

Afro-American

Dr. Thorne, ACS Foe, Backs New Hospital

Baltimore, Md. Sat. 6-21-47

NEW YORK—Of all the more than 65 Harlem doctors who have contributed toward the purchase of the X-ray Hospital here at 10 Mt. Morris Park, none perhaps has had as stormy a career in recent years as Dr. George D. Thorne, one of the leaders of the movement. are colored. Sat. 6-21-47

The first colored doctor to be named to the surgical staff of Lincoln Hospital in the Bronx, and also a member of the surgical staff at Sydenham, Dr. Thorne is the man who stated the policy of the proposed hospital venture in one sentence:

"We cannot afford the luxury of segregation."

Forced Policy Change

Dr. Thorne caused a tempest in medical circles in 1943 when, in applying for an application blank from the American College of Surgeons, he was informed that "members of your race are not being admitted at the present time." Sat. 6-21-47

Nation-wide publicity was given this "indefensible discrimination" by leading newspapers and magazines, following publication of the exchange of correspondence between Dr. Thorne and the ACS by the New York County Medical Association's journal. The journal also wrote a blistering editorial on the subject.

It took three years, but tangible results were obtained in Dec., 1946, when, in Cleveland, Ohio, 14 colored doctors were admitted to the ACS.

Won, But Excluded

Ironically, though, the name of Dr. Thorne was not among this 14.

Thus, the American College of Surgeons, for reasons of its own, has not seen fit to award a fellowship to the man who put up the original fight in 1943.

"It seems," said Dr. Thorne, last week, when interviewed by the AFRO, "that the man with the courage enough to challenge an existing evil is unfortunately the one who gets his neck chopped off."

Private Patients Barred

Doctors in Harlem have realized a desperate need for hospitals without segregation for many years.

Except for two or three small institutions with a very limited bed capacity, there are no hospitals in Harlem where a doctor may treat his private patients, if they

The few private hospitals in the Harlem area that admit colored patients at all insist that they take a private room—which is the most expensive service the hospital has to offer. Most patients prefer a "semi-private" status.

Patients, then, are penalized for being colored. And since, in most cases, the averaged Harlemite is the lowest paid where wages are concerned, the situation becomes one in which the man who earns the least money must pay most for hospital service.

In view of this well-known condition, Dr. Thorne feels that the purchase of the X-ray Hospital is one of the most important steps taken in Harlem in years.

done to keep up the standards.

The campaign is seeking $1,300,000 for 33 colleges. Frank M. Totton, vice-president of the Chase National Bank, is its chairman, and John D. Rockefeller Jr. heads the national advisory committee.

DR. PETER MARSHALL MURRAY.

ONE OF AMERICA'S MOST COMPETENT SURGEONS AND GYNECOLOGISTS * POST GRADUATE COLUMBIA UNIV * FORMER ASST-SURGEON-IN-CHIEF, FREEDMAN HOSPITAL * FELLOW OF THE AMERICAN COLLEGE OF SURGEONS * DIPLOMAT, AMERICAN BOARD OF OBSTETRICS AND GYNECOLOGY * WHO'S WHO IN AMERICA * HAS WORKED LONG AND PERSISTENTLY FOR THE INTEGRATION OF THE NEGRO PHYSICIAN INTO NATIONAL MEDICINE * AUTHOR OF IMPORTANT ARTICLES ON SURGERY * NATIVE OF HOMMA, LA.

Appoint 3rd Negro School Physician In Los Angeles

Chicago Defender

Chicago, Ill. 27

2-7-12-47

LOS ANGELES—(ANP)— Dr. Roy Kingsley, the third Negro physician to be accorded such honors was appointed a school physician last week.

The son of the Rev. Harold M. Kingsley, director of Pilgrim House, Dr. Kingsley served as a medical officer in World War II and is commanding officer of the medical corps unit of the Sixth Engineers battalion, California National guard. Sat. 2-12-47

A graduate of Meharry Medical College, the young physician completed his internship of Provident Hospital in Chicago where he was reared. He did post graduate work in internal medicine of the

University of Southern California graduate school of medicine

Only 1 Physician for Every 4,000 Persons

Afro-American

Baltimore, Md. Sat. 4-12-47

Survey Reveals 1 for Each 900 Whites; Teaching Ratio 1 for 201 Against 1 for 122

NEW YORK—There is only one physician for every 4,000 persons in the minority group, as compared with one white doctor for every 900 persons, according to a recent survey made by the United Negro College Fund, of which William J. Trent Jr. is executive secretary. Sat. 4-12-47

A similar situation was found in the field of education where there is one white teacher for every 122 children, and one teacher for every 201 children in the other group.

Estimating that 13,000 physicians and 42,000 teachers are needed, the survey states that "Americans who would demonstrate practical democracy to the world must teach hope by helping to release our own minority grous from despair."

Only 1400 Dentists

Mr. Trent declared that there are only 1400 minority dentists in America, out of a total of nearly 70,000. He placed the number of nurses at 8,000 among 400,000 in the nation, and found 1,000 lawyers among a total of 17,000.

Mr. Trent asserted that the fund, in its campaign for the support of a large group of colleges, is neither defending nor attacking the separate school system, but is trying to make clear the amount of educational work that must be

21j 1947

Women Are 'Fatheads' So They Aren't Bald, Howard Prof Explains

Chicago Defender — Chicago, Ill. — Sat. 8-9-47

WASHINGTON, D. C.— Dr. M. Wharton Young, Associate Professor of Anatomy at the Howard University School of Medicine, speaking before a large group of anatomists at Montreal recently, put forth the first convincing scientific theory concerning the cause of baldness, a malady which affects about 50 per cent of all males.

The 450 anatomists at the 60th annual conference of the American Association of Anatomists found no serious flaw in Young's theory, according to scientific reports.

Dr. Young, in a paper entitled "The Anatomical Factors of Senile Alopecia" pointed out that people get bald because they get "tense on top." Tension may be internal or external Internal tension would be caused by a large head: external by a tight hat or the explosion of an atom bomb.

Tension Causes Baldness

The top of the head where baldness comes with age does not have as rich a blood supply as the muscular sides of the scalp where the hair usually remains longer. Tension zones in the scalp cut down the blood supply to the top of the head, and this begins baldness.

Dr. Young pointed out that some of the atomic bomb pressure victims (those outside direct death zones) developed a senile type of baldness.

Baldness develops less frequently in women because they are "fatheaded." Dr. Young stated, explaining that he refers to the thicker layer of fat covering the craniums of women, a layer which causes a much better blood supply for hair roots. This fat, he said, also serves as a resilient cushion which relieves scalp tension.

Craniums Grow Until 50

Dr. Young further asserts that the craniums of men, particularly "mental workers" grow until their 40th or 50th year, and this growth causes new tension areas and resulting baldness.

Substantating his theory, Dr. Young performed a series of experiments on monkeys. By cutting out large areas of the scalps pulling the edges together and sewing them, he was unable to create "tension zones." Within a certain period the animals developed baldness similar to that found in humans.

This is only his first steps in the study of baldness, Dr. Young states. He knows now, he points out emphatically, no cure for baldness. Sat-8-9-47

Dr. Young was the only Negro scientist at the Montreal conference. His theory was previously issued in August 1946, in "War Medicine" published by the American Medical Association.

Harlem Medic To Head Guiana Health Program

21j — Chicago Defender — Chicago, Ill. — Sat-8-16-47

GEORGETOWN, British Guiana —Dr. A. Carlyle Miller, Harlem physician known throughout the United States as a leader in public health work, has accepted the invitation of the Guiana health authorities to head a progressive public health program here and to introduce modern American methods of preventive medicine.

Dr. Miller came to Guiana with his family for a two month visit, and was consulted by the local medical fraternity on methods for improvement of the existing health programs.

So impressed were they by his knowledge of tropical medicine, and his ability to suggest adaptations of American methods to the local problems, that government representatives issued the invitation to him to remain and to initiate action on some of the changes he suggested.

Dr. Miller is a graduate of the medical school of the University of Edinburgh, Scotland, and Meharry medical college, and has practiced in the United States since 1938. He was one of the founders of Gladden-Miller hospital and nurse training school at Cincinnati, Ohio, and later served on the staffs of Mt. Sinai and Harlem hospitals in New York.

Although Dr. Miller and his family plan to remain here for several years in connection with the new health program, they will retain their United States citizenship, returning there regularly for professional conventions, clinics, and elections.

Santa Monica Doctor Appointed Examiner

Journal and Guide — Norfolk, Va. — 21

SANTA MONICA, Cal. — Dr. Mary E. Norment was recently appointed chief, medical examiner for the United Insurers, national insurance firm for the Santa Monica area. A. F. Lightfoot, general superintendent of United Insurers, said this is the first time in the history of the firm that a Negro has been appointed to this position with the company. Sat.

Dr. Norment is also on the courtesy staff of the Santa Monica Hospital, and medical examiner for the Golden State Insurance Company. 9-6-47

MEDICAL SOCIETY LISTS NEW SCHEDULE OF FEES

Observer — 12-14-47 — Charlotte, N. C. — Sun. 3

Members of the Charlotte Medical Society (Negro) yesterday announced a new schedule of fees to be charged their patients. The fees, effective immediately, were announced for the Negro doctors by Dr. Roy S. Wynn, secretary. 12-14-47 Observer Sun. 3

The new fees: Home call, daytime, $4; home call, night, $6; Sunday call, $5; obstetrics case, $75.

Dr. Wynn said the Charlotte society also includes the Negro physicians in Monroe and Concord.

CATHOLIC HOSPITAL OPENS DOORS TO NEGRO DOCTORS

Atlanta Daily World — 21j — Pub. Atlanta, Ga.

By LOUISE STEPHENS

GARY, Ind. — (ANP) — St. Mary's Mercy Hospital here, large Catholic institution, voted Friday, July 11, to permit qualified Negro physicians equal rights with white doctors in using the facilities of the hospital. Board spokesmen said that the decision was reached after weeks of considering the move, and that applications from Negro physicians of Lake county would be taken at once. Sat-7-26-47

All doctors applying for hospital privileges must have attained the status prescribed by the American Medical Association and by the Lake County Medical Society.

Several agencies of the county have worked for nearly a year to attain an interracial staff at Mercy. Leading the move was the local Urban League whose president, H. B. Snyder, of the Gary Post Tribune, was largely instrumental in attaining the desired result. Snyder was ably assisted by Joseph Chapman, Gary Urban League executive secretary.

Chapman Friday expressed himself as confident that the city's large Methodist Hospital would quickly follow the lead of Mercy and its staff become interracial also.

Gary has 25,000 Negro residents, and thousands of members of other minority groups. Many of the Negro physicians of the community have had to turn their patients over to white doctors when hospitalization was necessary as Mercy and Methodist are the two largest and best equipped hospitals of the city.

Dr. H. H. Morrison Joins School Staff

Chicago Defender — Chicago, Ill. — 21j

Dr. Henry H. Morrison, junior attending dermatologist at Provident hospital has been named clinical assistant in the department of dermatology at Chicago medical school.

Dr. Morrison

Sat 5-3-47

The department is headed by Dr. Maurice Oppenheim, a native of Vienna, Austria.

Dr. Morrison is a member of the Cook County Physicians association, the NAACP and the Urban league. He is also a member of Kappa Alpha Psi fraternity, the Morgan Park Civic league and Beth Eden Baptist church.

First Negro Joins N. C. Hospital Staff

Journal & Guide

SANFORD, N. C. — Dr. J. S. Simmons was recently appointed a staff member of the Lee County Hospital here and is the first Negro to serve in that capacity. 9-20-47

DR. SIMMONS

Dr. Simmons, a graduate of Morehouse College, has been practicing for more than two years in Georgia. He has been a staff member of Veterans Hospital, Tuskegee Ala., and North Carolina Sanitorium.

He is a member of Alpha Phi Alpha fraternity and of the Masonic Order, and is chairman of the local school board. His internship was served at Kansas City General Hospital No. 2.

Negro Doctors 3 Pct. Annual U. S. Output

21j — Chicago Defender — Chicago, Ill.

(Defender New York Bureau)

NEW YORK — Citing figures to prove her point, Dr. Viola W. Bernard said the existence of "the practices" of the quota system in medicine "has been fully demonstrated."

Speaking to the New York chapter of the Physicians' Forum in the New York Academy of Medicine, Dr. Bernard said: 3-29-47

"From the United States' annual output of 5,000 physicians, only 130 are Negroes—of whom all but ten graduate from the two all-Negro medical schools. The significance is heightened by the fact that these conditions existed at the same time as organized medicine voiced great alarm at the threatened post-war shortage of physicians."

Fewer than fifty Negro physicians or an average of two a year were graduated from the five New York City medical schools from 1920 to 1945. Dr. Bernard also charged, "The quota policy may be openly acknowledged or maintained sub rosa, but the existence of this practice has been fully demonstrated." Sat.

As to Jewish students, Dr. Bernard added that only about seven per cent of all Jewish medical school applicants are accepted. From 1920 to 1940 the proportion of Jewish students in New York City's schools decreased 64 per cent relative to other students, and 50 per cent throughout the U. S.

Trustees to fill the post of director of medical affairs. Sat 10-11-47

The office has been filled temporarily by Dr. Count J. Teffner, who is president of the hospital staff. Dr. Calloway took over his new duties Oct. 1.

He is 39 years of age, and a native of Alabama. He received his B.S. and Ph.D. at Iowa State College and is also supervising a naval research project on convalescents. Dr. Teffner remains as president of the staff.

Calloway Gets Provident Post

Chicago, Ill.

Dr. N. O. Calloway, prominent young Chicago physician, has been elected by the Provident Board of

...college in the fields of chemistry and bacteriology. He earned his M.D.

Negro Appointed To Gary Hospital

GARY—The appointment of Benjamin F. Grant to the staff of Mercy Hospital was approved unanimously this week by the hospital's executive committee, according to Staff Chairman Dr. Joseph Donchess. He is believed to be the first Negro doctor to join the staff of Mercy Hospital.

Dr. Grant

Dr. Grant studied medicine at Howard University in Washington, D. C., and took his interneship at Homer G. Phillips Hospital in St. Louis. He has practiced medicine in Gary for two years, and recently returned from a post-graduate course in surgery this summer at the University of Buffalo Medical College.

are Drs. U. G. Dailey, Chicago; John R. Finney, Cleveland; H. J. Lukeman and M. Russell Nelson, both of New York. Dr. Dailey is a Founder Fellow. Right: Drs. Remus G. Robinson of Detroit and J. H. Selman of Charleston, W. Va.—Manney Photos.

Liberian Health Mission Head Leaves New York

NEW YORK—Major John Manley of the Liberian Public Health Mission headed by Dr. John West returned to Liberia last week after a month in New York.

Major Manley, trained as a surgeon, does half the surgery of the mission in Monrovia, and also acts as dean of the nursing school recently created by the mission. The major was understandably loath to return to Liberia, as he had not seen his wife, now in New York, for 18 months. He had never met his year old son, John Jr., before his visit here of a month ago.

Stops Epidemic

In the army since 1941, he was also stationed in Liberia once, but in 1946 was released from the army to go into public health service, and return to Liberia with the West Mission. There are now Dr. West, another surgeon, Major Poindexter, a bacteriologist; an expert in radiology; and a chemist forming the professional staff of the mission, aided with six nurses. The mission does not operate its own hospital but works through the Liberian National Government Hospital in Monrovia.

Earlier this year, a potential small-pox epidemic was headed off in Liberia through the yeoman efforts of the small but able mission. One of its principal concerns now is the newly created nursing school.

To Train Girls

Their goal is to train Liberian girls in nursing and then send them out into the bush. Already there is a nursing station two and a half miles back into the bush from Monrovia. One class was graduated from the school this spring and the goal is 35 to 40 nurses every three years, the normal training period. The medical men of the mission are so in demand, that Major Manley, the nursing school dean, scarcely realized he was due to make the graduation address this spring until he was introduced at the commencement exercises.

Born in Benson, Ala. 37 years ago, Major Manley grew up around Tuskegee Institute where his father taught printing and his mother was the chief occupational therapist at Tuskegee hospital for many years. He graduated from Howard Medical School and took his residency in surgery at Freedmen's Hospital in Washington. Later he did advanced work in orthopedics at Iowa State University. His army experience starting in 1941 took him to Fort Bragg, N. C. where he met First Lieut. Louise Jacobs, a Brooklyn, N. Y. born member of the Army Nurse Corps. They were married in 1944 while Captain Manley was serving in the Medical corps at Tuskegee, following an 18-month's period of service in Liberia.

Back To Liberia

Then followed a hectic military-marital career for the attractive young couple. Lieutenant Manley of the Nurse Corps went to England for 18 months where she nursed German prisoners of war and later American wounded. She recalls now the grueling stretches of 13 and 14 hours work at a time. When she was returned to the U. S. the major was sent back to Liberia.

It seems to both now that they were and are like ships continually passing in the night. Now he is back in Liberia at least until March, 1948 when he may return here and try for the surgery or orthopedic boards and go into a hospital; or stay on in Liberia with the mission. Mrs. Manley, trained at the Bronx, New York Lincoln School of Nursing, doesn't know yet about returning to her own profession in the future. For the new few years, at least, the Manleys are most concerned with returning to married life together.

Dr. Charles Drew Blasts Myths In Tribute

By LUCIUS JONES
(Louisiana Bureau)

NEW ORLEANS—The first scientific treatise on the Negro in America was done in this city in 1851 and characterized Negroes as incapable of absorbing and developing American culture, it was stated here Sunday by Dr. Charles R. Drew, head of the Department of Surgery in the School of Medicine at Howard University, Washington, D. C.

Adding that today, however, less than one hundred years later, the Negro has exploded all such myths and views, he expressed hope for the day when health will be treated not on a basis of race, but that of general welfare.

Dr. Drew, also head of the Department of Surgery at Freedmen's Hospital and former Spingarn Medalist, was guest speaker at the public testimonial for Dr. Rivers Frederick, chief of surgery at Flint-Goodridge Hospital, Dillard University.

The testimonial was preceded by the unveiling and presentation of a portrait of Dr. Frederick at a private ceremony.

COMPLETES FIFTY YEARS' SERVICE

Presented by Dr. Albert W. Dent, president of Dillard, as one of the most skilled young surgeons in the country, Dr. Drew, speaking objectively before paying a glowing tribute to the prominent Louisiana surgeon, now 73, for fifty years of unselfish and humanitarian service in the medical profession, said:

"Negroes must achieve faster in America today than the white man. The average life of the average white male and female is 65 years; that of the average Negro adult is less than 55. We have a two-fold job.

"First, we must make 'our' things the finest possible; second, we must destroy all theories that promote 'separatism.' Our standards must be high. Our schools and hospitals can be models. We must persevere and realize that, ultimately, anything of real merit will be acceptable to society."

LAUDS DR. FREDERICK

Dr. Drew said that men like Dr. Frederick will hasten the time when all major considerations, especially those of health, will be on the basis of factors other than race and color. "Dr. Frederick is not an old man, but still thinks with youth and dynamic power," he declared.

Dr. Drew revealed that Dr. Frederick was the first Negro to perform a surgical operation in New Orleans in 1898, just one year after his graduation from the University of Illinois.

He was born in Point Coupee Parish, received his early education and was graduated from Straight College, now Dillard University. He worked two years after graduation in the clinic of the late John B. Murphy in Chicago, then came to New Orleans and practiced until he went to Spanish-Honduras for four years as chief surgeon of the Government Hospital in El Roi Tan.

TAUGHT MEDICINE

Later, he returned here and was Associate Professor of Surgery in the old Flint Medical College and chief surgeon of the old Sarah Goodridge Hospital. He served the Southern Pacific Railroad from 1913-1932 as a surgeon. From then until the present time, he has been surgical chief at Flint-Goodridge.

In recent years, Dr. Frederick has taught along with professors of the Medical Schools of Tulane University and Louisiana State University in a post-graduate course for physicians conducted annually at Flint-Goodridge since 1935.

He has been a tireless community leader and ambassador of racial goodwill. Since 1936, he has served as president of Louisiana Industrial Life Insurance Company here.

Forged License Traps Tenn. 'Doctor,' 83, After 40 Years

MEMPHIS (ANP)—Rufus Fuller, 83, who has been practicing medicine here for over 40 years, coming here in 1904 after practicing in Kentucky and North Carolina, was arrested recently on a charge of using "forged credentials." He admitted purchasing a certificate

nd forging his name to it. Fuller's claim that he is a graduate of Howard University's Medical School was denied by officials who said no none by that name ever attended the university. His arrest was the first under the new State law requiring registration of all medical practitioners with the State Licensing Board.

Dr. W. H. Qualls, secretary, Tennessee Board of Medical Examiners, said there was no such certificate as No. 7843, series B, issued in 1903, which Fuller claimed. He admitted later that he inserted the number "seven" before the 843. His office door sign read, "Physician and Surgeon."

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OUR DOCTORS

For a physician to qualify for high honors and many advanced educational opportunities in his field of specializations, he is often required first to be a member of the American Medical Association. Unless, however, he is accepted as a member of his county medical society which is affiliated with AMA, he cannot hold membership in the association. These county medical societies have local autonomy and in the South they rigidly exclude Negro doctors which, of course, serves to deny the latter AMA membership.

However you look at it, here is the old story of racial discrimination which penalizes us for no other reason save the color of our skins. Many colored doctors in Northern cities are members of their county medical societies and hold membership in AMA. The majority of our physicians, however, as well as the majority of Negroes live and work in the South. Thus this great group of doctors, over 2,000, are automatically out-of-bounds as far as the AMA is concerned.

Last week this issue was vigorously debated by the New York county medical society, an AMA affiliate. A resolution urging the AMA hierarchy club the right of the southern societies to exclude Negro doctors was unfortunately defeated. Another resolution providing some "special type" membership for these Southern medicos who are now barred won out.

Whether the AMA finally takes this way out of the dilemma or not, the ugly fact remains that our doctors in the South are discriminated against and denied opportunities to make their maximum contribution to the health of the nation. Like most racial barriers, this one ultimately injures both races.

White Southerners have as much to gain as anyone from a healthy general population because disease stubbornly refuses to respect color lines. Further the rigid segregation of the races in Dixie does not keep the races apart as advertised. The poor white Southerner who is ready to lynch a Negro at the drop of a hat often dreams of the day when he can afford a colored cook in his kitchen or a colored nurse for his child.

It would seem therefore that the AMA affiliates in the South would be eager to extend membership to their colored colleagues on the grounds of common sense if for no other. Of course, attributing any kind of sense to the race-crazed elements in Dixie may be doing violence to the language. Nevertheless, we do hope, for their sake as well as ours, that a bolt of intelligence, like lightning, will wake up the crusty Southern medicos who have taken the oath of Hippocrates in vain.

Flint-Goodridge Surgical Head Observes Golden Anniversary

BY LEON LEWIS

NEW ORLEANS — (ANP) —Dr. Rivers Frederick, chief surgeon of Flint-Goodridge hospital and president of Louisiana's leading Negro insurance company, will be honored with a lawn fete Sunday afternoon, Nov. 26, at Flint-Goodridge hospital on the occasion of his 50th year in the field of medicine and surgery.

Principal speaker for the occasion of the department of surgery at will be Dr. Charles R. Drew, head Howard university who developed the use of blood plasma during the last war.

Dr. Frederick is a native of Louisiana; although he is a widely traveled man, most of his life has been spent in this state.

He attended Straight college here and Illinois university, receiving his degree in surgery from the latter a half century ago.

VARIED EXPERIENCE

Dr. Frederick practiced at Dr. John B. Murphy's clinic in Chicago for four years; headed the government hospital at El Riotan, Spanish Honduras for four years; spent one year at Quintanero, in the province of Yucatan Mexico.

Upon returning to the United States Dr. Frederick was appointed surgeon for the Southern Pacific railroad, a position he held for 20 years.

When the new Flint-Goodridge hospital was organized in 1932, Dr. Frederick was appointed head of the surgery department. He was the only Negro chief of staff at that time. He has been one of the main cogs in Flint's roll of development, both in the training of Negro medics and in medical service and hospitalization to Negroes. He is chief instructor in surgery of the annual postgraduate courses offered at the institution.

Dr. Frederick's interest and abilities do not lie in the medical field alone. Since its organization in 1920 he has been president of the Louisiana Industrial Life Insurance company, Louisiana's largest with over $1,000 000,000 in assets and nearly $12,000,000 worth of insurance in force among over 100,000 policy holders.

Negro Doctors

Editor Constitution: I visited Los Angeles, Cal., last August and found that 32 Negro physicians had located there in the past two or three years. The majority of these had moved from well-established practices in the South. A few were younger doctors just getting started.

There is obviously a close relation to the above-mentioned fact and the general situation of unsatisfactory hospital facilities for practice and postgraduate training available to the Negro physicians in this region.

For 20 years I have been in general practice in Atlanta indulging in the best ethical tactics of medical practice I could command, using methods grasped by reading medical periodicals, telephone talks with hospital doctors, attending one-week postgraduate courses and medical conventions. I fully appreciate the fact that systematic training would have been better for all concerned but only the hard, uneconomical way was open.

Now on the threshold of a new day when plans are being laid to make Atlanta a great health center, through additions to Grady Hospital, Federal units, proposed tuberculous units and Federal aid, I hope that the way will be opened for Negro physicians to get training, in order to treat their own people more scientifically.

There has not been offered any special attractions by Atlanta to the 120-odd Negro medical graduates yearly of Howard and Meharry Medical Schools. And only about three or four in eight years have come here. They have gone to the cities in other parts of the country which offered hospital advantages. St. Louis, Chicago and Columbus, Ga., have such hospitals.

I believe that a unit could be established in Atlanta in the vicinity of Grady Hospital, which is in a predominantly Negro section, supported by tax funds as an example of what can be done for the good of the health of Negroes. In this unit which should have at least 100 beds, our patients could be treated by doctors of their own group who in turn receive training in the latest methods of medical practice without having to go elsewhere for these opportunities.

I hope that members of the Atlanta Hospital Authority will keep these facts in mind when they make up their budget.

DR. MARK. A. THOMAS.

Atlanta,

Prescription

NEGRO MEDICS, as we were saying, get along. Dr. Charles Prudhomme of Howard U., a successful psychiatric, became a Diplomate in Nerology and Psychiatry. Dr. Roscoe Lee, oral surgeon, passed the American Board of Oral Surgery exam in Chi, becoming the first Negro to get this diploma.

In Washington, campaign waged by Howard doctors, abetted by the NAACP, began to bear fruit as Gallinger Municipal Hospital took actual steps toward allowing Howard med students to train there along with those of Georgetown and George Washington. The daily press, astounded by disclosures in NAACP's "Medical Care and the Plight of the Negro," put special and feature writers on this subject. That "Independent Committee" of Negro meds, dubbed "recalcitrants" by many, fell apart as prominent doctors indignantly ordered their names stricken from the letterhead.

But, Gallinger Hospital looking for psychiatrists, continued to look over heads of qualified Negroes; Lynchburg, Bessemer (Ala.), Homestead (Fla.), Ennis (Tex.), Hickory (N. C.) and Pensacola advertised desperately for Negro meds to leave the big cities and come practice there, and the Negro meds as a mass continued to dodge any welfare issue which look like a threat to their worshipped income.

possible attainment, not on the ideally desirable goal.

¶ Thanks to the Federal Cadet Nurses Corps program initiated in wartime, a record total of 44,700 nurses were graduated this year. But that program is ended, and the aforementioned survey indicates that the number of nursing graduates will drop progressively to 26,700 in 1950.

Government Aid Needed For Medical Education

The needed doctors and other professionals won't be produced by magic. Only planned effort can avert the anticipated crisis in medical personnel.

"Even though a demand for trained personnel for mobilizing the Nation's medical talent in "the next war." Would that he and his associates gave as much time and attention to the medical problems of peace, some of which are growing more acute daily.

Take the problem of the critical peacetime shortage of medical, dental and nursing is steadily increasing," Dr. Parran points out, "our manpower that faces the Nation in the near future system of supply is not geared even to the status quo. We are producing our annual output of doctors in this country not by plan but by happenstance. The number has no relationship to anyunless something is done about it.

By Albert Deutsch

Only Public Aid Can Avert Crisis in Doctor Output

At Least 50,000 More M.D.'s Needed by 1960

thing I can discover except the present physical and financial capacity of existing medical schools."

The present production of physicians is about the same as it was a decade or two ago, when the effective buying power of the people and the level of medical science were both far lower than they are today. The rate of doctor-production isn't sufficient for our current needs, much less for those of the future.

"One of the principal stumbling blocks to producing more physicians," Parran observes, "is the precarious condition of many medical schools. Tuition payments meet only a fraction of the costs, although tuition fees have been raised 20 per cent since 1940 and now average $459. If the schools are to continue to offer adequate medical training, they must have financial stability."

Only public funds can assure such stability, Parran believes, along with most leading experts.

"Special attention," he adds, "needs urgently to be given to increasing the training facilities for Negro students—now limited to two institutions, plus 8 to 10 Negro students per year who are admitted to other schools."

Parran outlines a program of Federal aid for the medical education of qualified students who would agree to serve in Federal health and medical services one month for every month their schooling is subsidized. He also urged the several states to inaugurate grants-in-aid for medical and public health personnel earmarked for their own services.

The program is sound; it is urgently needed. When it is put in effect, guarantees should be provided that subsidized students will be picked on the basis of quality, and not on racial or religious origins.

Surgeon General Thomas Parran of the U. S. Public Health Service, a true statesman, has been looking ahead. In an address delivered Tuesday at the annual conference of State and Territorial Health Officers, he presented this picture of anticipated needs by 1960:

¶ It is estimated that 50,000 to 55,000 more doctors will be needed by 1960 than are now in prospect. To reach this goal means almost *doubling* the present output of doctors for a decade. (About 150,000 physicians are now in active practice, with some 5200 new doctors graduating every year. Deaths and retirements of physicians almost cancel out the annual additions to the profession.)

¶ The situation regarding dental education is even worse. There are now only about 75,000 dentists in the whole country. This total isn't enough even to tackle the top-priority problem—systematic and continuous dental care for children—even if all other dental needs were ignored. To give proper dental care to the whole population, Dr. Parran estimates, more than double the present number of dentists will be needed by 1960.

¶ A recent survey conducted jointly by the U. S. Women's Bureau and the National League of Nursing Education indicates that 500,000 to 550,000 professional nurses—or 200,000 more than were available in 1946—will be needed by 1960 if current standards of nursing are maintained. This estimate is based on a realistic appraisal of

Md. Doctor Passes National Board Test

BROOKLYN, N.Y.—Dr. Oscar C. Allen of Baltimore, now specializing in neuro-psychiatry at the Long Island College of Medicine here, recently passed part 3 of the National Board of Medical Examiners' test. Completion of the test entitles a physician to membership in the associated Diplomates of the board.

Dr. Allen is a 1947 graduate of the medical school of Howard University, and was discharged from the Army last March with the rank of captain.

L. A. Hospital Gets First Race Interne

By HERMAN HILL
(Courier's Los Angeles Bureau)

LOS ANGELES—Announcement of the appointment of Dr. Oner B. Barker Jr., to a three-year training residency in internal Medicine at the Los Angeles County General Hospital was made this week by Supervisor Leonard J. Roach, who sponsored the candidacy of Dr. Barker.

The appointment marks the first time in the West that a race physician has been thus recognized.

ABILITY WINS

"Dr. Barker was up against the unusually stiff competition of professional men with years of training and experience," Roach declared, and he won this appointment on his superior ability and merit.

"His appointment was made possible because of our policy of fair play.

"When I was requested by Mrs. Bettye Hill to recommend Dr. Barker, I was delighted to do so because of his splendid record during his two-year internship at the General Hospital, and his reputation as a gentleman and a scholar," Supervisor Roach continued. "Dr. Barker has since rated in second place over a large field of candidates on the civil service examination list."

UCLA GRAD

Dr. Barker, who was graduated from University of California at Los Angeles in 1942, also received a degree from Howard University of Medicine where he was graduated in September 1945.

Supervisor Roach points out that the training which Dr. Barker will receive as a result of the appointment will lead to a certificate as a specialist in internal medicine.

Dr. Barker is the son of Mr. and Mrs. O. B. Barker Sr., of 1635 East 111th Street, Los Angeles.

Dusting off the NEWS

By LUCIUS C. HARPER

DOCTORS, 'GO SOUTH'; BUT THIS ONE CALLS A 'HALT!'

STATISTICS have shown that the race is meagerly supplied in the medical profession. Even in cities like New York there is only one Negro physician to serve every 10,000 persons in his own race. In districts of the South the condition is almost appalling; Negroes have to travel miles to secure proper medical aid. Medical student quotas established by white universities against admittance of Negroes have so limited the output of qualified doctors that the burden of such professional training has been largely centered in only two colored colleges: McHarry in Nashville and Howard in Washington.

Lucius C. Harper

A national weekly recently made a plea to Negro professional men to "Go South" and establish themselves where their services are most needed, and where they could be of inestimable value and worth to their race. The editorial skipped my notice, but Dr. Herbert B. Henderson, prominent physician and surgeon, located at 2085 Sutter street, San Francisco, Calif., did read it and takes issue with the plea in the following manner:

"I am writing you in reference to an editorial that was printed several weeks ago in one of the Negro weeklies advising Negro physicians, dentists and pharmacists to locate and practice in the South. The author of the article pointed out the fact that there was an acute shortage of physicians there, and more were needed to meet the demand for adequate medical care for the Negro. This is quite true, but the author failed to state the disadvantages of a young, ambitious and energetic physician locating in the South.

"FIRST of all in the majority of areas, the South furnishes no accredited hospital facilities where a Negro physician can best serve his patients. Secondly, the South is the poorest section of the country, and the Negro patient is not able to adequately pay for the care that he should receive. Third, segregation is the law of the South, and Negro physicians are unable to affiliate with the county medical societies. The Negro physician practicing in the South has no incentive to study and further himself in his professional training by virtue of the low economic and social standards of the South. With few exceptions, Negro physicians in the South are definitely inferior in training and ability to those in other areas of the country. Those that do decide to practice there soon fall into a rut having no incentive to study or further themselves by research in their chosen fields. I feel that the pattern of segregation should be ended before encouraging young Negro professional men to 'Go South.'

"There are many other areas of the United States that are lucrative fields and are in need of Negro physicians other than the South. The states of California, Arizona, Washington and Oregon all could absorb Negro physicians, dentists and pharmacists, and in these states one is not constantly reminded of the color of his skin. I would appreciate it greatly if you would present this expression before your readers in order that they may see the unfavorable side of the issue.

"I am a Negro physician and served in the army as a captain for five years, and feel the sacrifice I made to my country is too much to live in a segregated and Jim Crow set-up."

THERE you have one side of the issue. In the event some physician in the South who has established a practice in a small town, or large one for that matter, wishes to give the other side of this issue, this column is open to him. A friendly discussion of this matter may do good.

Dr. Paul Boswell Honored

When the American Academy of Dermatology held its sixth annual convention at the Palmer House Dec. 6-12, Dr. Paul Boswell, 6321 Champlain ave., was elected a member, one of three Negro members in the United States.

Dr. Boswell, a graduate of the Minnesota Medical school, is on the faculty of the University of Illinois

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American College of Physicians

Dermatologist Named College Of Physicians' Associate

(21j) Pub. Atlanta, Ga.

Wed 12-31-47

NEW YORK—(ANP)—Dr. Gerald A. Spencer, eminent Harlem physician and recognized authority in the fields of dermatology and syphilogy, was named to associate membership in the American College of physicians here last week after a three year wait for the medical group to act upon his application for admittance. As an associate member, he becomes the second Negro to have been admitted, the first being the late Dr. Algernon B. Jackson, Philadelphia.

12-31-47

A native of Castries, St. Lucia, British West Indies, Dr. Spencer has lived in the United States since 1921. He earned a bachelor's degree at City College here, and completed his medical studies at the University of Lyons, France, through a special fund created by several of the professors at City College.

Interested in the fields of dermatology and syphilogy, which he intends to pursue for his graduate work, Dr. Spencer popped into the national limelight when he was named Sydenham hospital's interracial voluntary staff. He is currently serving at both Harlem and Syndenham hospitals, as well as at the New York Post Graduate Medical School hospital in the capacity of associate dermatologist and syphilogist, and assistant physician in charge of social hygiene for the New York City health department.

Prolific Writer

Wed 12-31-47

He holds fellowship in the Academy of Medicine; Royal Tropical Society London; and is a diplomate of the American Board of Dermatology and syphilogy. He is also a prolific writer, having compiled a book entitled "Cosmetology in the Negro," contributed to the Achives of Dermatology and Syphilogy' and has a study of the contribution of the Negro to medical progress in New York coming off the press under the title "Medical Symphony."

Speaking of his recent appointment, Dr. Spencer said, "I'm not too concerned about the wherefores. However, I did speak in Philadelphia before a group prior to the national body's meeting in the city, and whether someone who heard me was responsible for my sponsorship is somewhat of a conjecture.

"The recent drive against discrimination in organizations open to physicians and surgeons may be another factor. I am happy to be among them, whatever the consideration, purely on the basis of my merit as any other member admitted."

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AMA

Ask Jimcrow AMA Card For Negro Doctors

21j

The N. Y. County Medical Society, at a stormy meeting Monday night, voted to request the American Medical Association (AMA) to set up a segregated type of membership for Negro doctors, after it had voted down an amendment to condemn county societies which barred Negroes.

21j

Barton Pevear, spokesman for the Society, explained yesterday that the action was taken to provide some method whereby Negro doctors, barred from their local groups, could join the AMA. The N. Y. County Society, he added, does not discriminate against Negro doctors, who are full-fledged members and hold positions on several of its committees.

TWO-WAY HARDSHIP

Negro doctors who are barred by their county societies cannot become members of the AMA, Pevear explained. This results in hardship for them as physicians since they cannot receive certification of the AMA's Board in their specialties. Uncertified physicians find it almost impossible to get hospital appointments.

21j

The resolution adopted Monday night, Pevear said, was intended to open the way for Negro doctors to participate in the benefits of AMA membership. Asked whether the Society's recommendation would not result in segrated membership for Negroes, Pevear replied:

U. OF ILL. PROFESSOR—Dr. Nathaniel O. Calloway, left, holds rank of clinical assistant, professor of medicine and research assistant in medicine at the University of Illinois. Here he is shown demonstrating examination of a patient to Dr. Charles E. Rossell, research fellow in medicine. Dr. Calloway is also the medical director at Chicago's Provident Hospital.

Mr. June P. Brodnax, former Memphian and son of well-known public school teacher Mrs. Jennie Brodnax, completed a course in Optometry at Monroe College in Chicago, Ill., last month, and will pursue further studies in diseases of the eye in New York. He is now living in Chicago, Ill. He is best known here as a brilliant tenor singer. He is pursuing his studies under the GI Bill of Rights, since he served as a chaplain's assistant in the U. S. Army during the war. He is a member of the Omega Psi Phi Fraternity.

TOKI types

ABOUT PEOPLE HERE AND THERE

...BY...
Toki Schalk Johnson

Pittsburgh Courier

The Negro Physician . . .

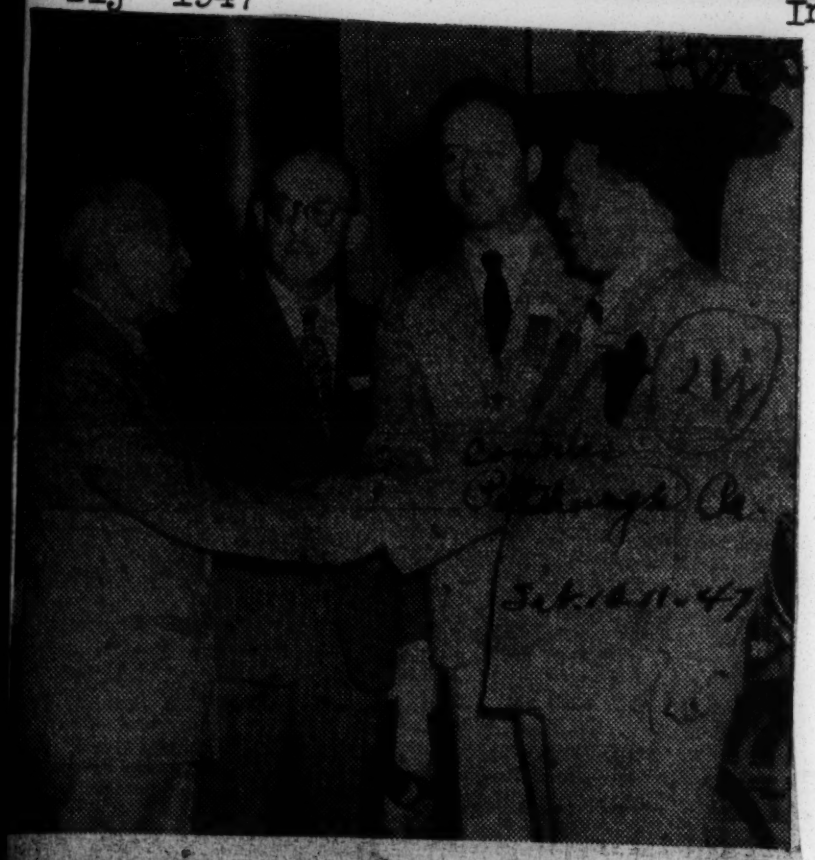
Our friend, Ol Harrington of the NAACP, has placed on our desk the latest service by the organization . . . a phamplet on "Medical Care and the Plight of the Negro," compiled and written by Dr. W. Montague Cobb, (Ph.D. and M.D.) . . . professor of anatomy at Howard U. . . . Dr. Cobb deals directly with the scarcity of Negro doctors . . the ill health of our people . . .and what should be done to help the situations. We haven't read the entire booklet as yet . . . but standing out on page thirty-six in the summary is this statement . . . "To remedy the situation (of the lack of doctors) many things are needed, material and conceptual. The historical attitude of regarding Howard and Meharry as responsible for training the majority of Negro doctors is obsolete. The combined production of these schools has never been able to keep pace even with the growth of the Negro population. What is indicated is for Howard and Meharry to open their doors to more white students and for the other seventy-five medical schools, South as well as North and West, to admit qualified Negro applicants as they appear."

There are facts and figures in this booklet that many of you ought to read . . . to keep you up on what is happening among our professional folk. (There is the sum of 10 cents charged for the pamphlet . . . and you write to the NAACP, 20 West Fortieth Street, New York 18). For instance, our top flight medical and surgical men are notably modest . . . they dodge publicity . . . but sometimes its nice for the layman to know the honors that are bestowed on them . . . because those honors come through their efforts, not just as empty crowns on empty heads. Many of the names listed as specialists in various fields, we know or have met . . . Howard M. Payne, Dee Cee . . . Charles A. Drew . . . Clarence (Spoof) Green . . . the late Doug Stubbs . . . Carl G. Roberts, Chicago . . . Middleton H. Lambright, Cleveland . . . Chester W. Chinn, New York . . Thomas W. Patrick, New York (and former Bostonian) . . . Russell Minton, Philly . . . John E. Moseley, New York (cancer specialist) . . . George C. Branche, Tuskegee . . .

And did you know that the late Dr. Daniel Hale Williams of Chicago was inducted in the select American College of Surgeons at its organization in 1913 . . . Dr. Louis T. Wright of New York was admitted in '34. Since then (within the past two years) fifteen additional surgeons have been made "Fellows". The complete list of Negro Fellows of the American College of Surgeons includes:

Daniel Hale Williams (Northwestern, '83), Chicago (deceased)
Louis Tompkins Wright (Harvard, '15), New York
Ulysses Grant Dailey (Northwestern, '06), Chicago
Roscoe C. Giles (Cornell, '15), Chicago
Chicago
Farrow H. Allen (Harvard '26), New York
Alton E. Blythewood (Meharry, '34), Newark, N. J.
Chester W. Chinn (Michigan, '35), New York
Aubre deL. Maynard (NYU, '26) New York
M. Russell Nelson (U. of P., '20), New York
Ralph H. Young (Columbia, '14), New York
W. Yerby Jones (U. of Buffalo, '24), Buffalo.
Euclid P. Ghee (Harvard, '27), Jersey City, N. J.
Clement Mervin Jones (Howard, '34), Bayonne, N. J.
Frederick D. Sutbbs (Harvard '30), Philadelphia (deceased)
James C. Whitaker (Harvard, '27), New York

Holding membership in the International College of Suregons are Dr. Dailey, Dr. Drew, Dr. Giles and Dr. Peter M. Murray. Doug Stubbs was an associate fellow, having lacked by a year at the time of his election, the qualifying age of forty . . . There are more physicians who have been honored in the medical school society, Alpha Omega Alpha . . . All of the men we have mentioned have delved deep into th intricacies of specialization . . . and we need more! We need more "family" practitioners . . . more surgeons . . . more men of medicine!



DEMOCRACY IN MEDICINE—Pledging themselves to fight shoulder to shoulder to preserve humanity, Fellows of the International College of Surgeons, meeting in Chicago last week, inducted several outstanding colored surgeons into their fold. Left: Among them, left to right, is a Founder Fellow. The new members hold outstanding status in medicine and surgery in this country.

Dr. Nelson is assistant professor of gynecology and obstetrics at New York Medical College, and attending gynecologist at Flowers Hospital; Dr. Finley is attending gynecologist at Mount Sinai Hospital, Cleveland; Dr. Walker is professor of surgery at Meharry Medical College.

Dr. Jefferson is attending surgeon at Provident Hospital, Chicago; Dr. Robinson is attending surgeon at a Detroit hospital. Dr. Weathers is associate director of Homer G. Phillips Hospital in St. Louis, and chief surgeon at St. Mary's Infirmary, and one of three surgeons who have performed successfull operations on the human heart. 10-11-47

George S. Messersmith, former Ambassador to Argentina, was the chief speaker at the meeting, and President Truman sent a message which was read. It meets next May in Rome, Italy.

Int'l College Of Surgeons Admits Group

21j

By TED COLEMAN
(Chicago Bureau)

CHICAGO—Thirteen years after its founding in this city, the International College of Surgeons last week inducted six distinguished Negro Americans into membership to join the two who already had been so honored. The six were among a group of 310 outstanding surgeons from America and seventeen other countries.

Inducted were Drs. M. Russel Nelson of New York City; John Finley of Cleveland; Matthew Walker of Nashville, Tenn.; Nelson Jefferson of Chicago; Remus Robinson of Detroit, and Henry H. Weathers of East St. Louis, Ill. Drs. Jefferson and Robinson were inducted as Associate Fellows. Sat. - 10-11-47

TWO ALREADY MEMBERS

Already holding memberships are Dr. Roscoe C. Giles and Dr. U. G. Dailey, both of Chicago. Dr. Dailey

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Southern Medical Association

VICTORY IN BALTIMORE

BALTIMORE (NR correspondent)

Jim Crow. The Freedom Train and the annual meeting of the Southern Medical Association arrived in Baltimore simultaneously, and for a time it appeared that the coincidence would be embarrassing. No segregation was to be permitted aboard the Freedom Train, of course; but the Southern Medical Association's program, published in Birmingham, Alabama, announced that only white persons might attend its Baltimore sessions.

Four days before the medical meeting was to begin, 10 Negro members of the resident staff of a Negro hospital wrote to the President's Committee on Civil Rights: "We find it bitterly discouraging to report that certain members of our profession are bound together by dictates and attitudes which are directly and indirectly responsible for a shameful blot on our democratic record. . . . Small wonder then, the high death rate, the high incidence of tuberculosis and venereal diseases and the shorter life span of the Negro when, among other atrocities—economic and social—the Negro doctor of the South (and elsewhere, for that matter) is denied the privilege of meeting with other members of his profession to discuss and evaluate the innovations and changes in methods and thought which make for modern . . . medical procedure."

The next day the *Afro-American*, Baltimore's Negro newspaper, printed photostatic reproductions of the Southern Medical Association's preliminary announcement. Simultaneously, white doctors joined Negro doctors in protesting to the Baltimore City Medical Society. Some threatened not to read their papers if Negroes were prohibited from attending the meeting; others threatened not to submit their papers, after reading, to the society for publication; still others refused to make donations to finance the meeting. The City Medical Society, as host to the meeting, announced it would admit Negroes to scientific (but *not* social) sessions whether the Southern Medical Association liked it or not, and so informed the latter's president, Dr. E. L. Henderson, in Louisville.

Precedent. The day before the meeting, the City Medical Society sent telegrams to the Negro doctors, inviting them to the meeting. Later, the council of the Southern Medical Association, representing 16 Southern states, capitulated, and formally approved the city society's action.

The result was that for the first time in the Southern Medical Association's 41-year history, according to Dr. Henderson, Negroes attended the association's annual meeting.

Eventually, some of the members of the City Medical Society hope to go further, for, so far as membership is concerned, their society still is Jim Crow. They remember that the last time the Southern Medical Association met here—only 10 years ago—it imposed the same restrictions it sought to impose this year, and nobody bothered to do anything about it.

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Women

By Albert Deutsch

Who 'Errs' About Race Discrimination At the State Psychiatric Institute?

21j Women PM. New York. N.Y. Wed. 12-11-47

Last February, in this space, I described a peculiar type of racial discrimination practiced at the New York State Psychiatric Institute and Hospital and defended by its practitioners on grounds of scientific research. It seemed strange to me that a State institution should discriminate against Negro professionals and patients in apparently direct violation of the State's own Civil Rights Law and contrary to the dicta of the State Commission Against Discrimination.

Deutsch

The Institute, operated by the New York State Dept. of Mental Hygiene, is affiliated with the Columbia University College of Physicians and Surgeons and is located at the Columbia-Presbyterian Hospital Medical Center on West 168th Street. It is mainly a psychiatric research and training center, and is directed by Dr. Nolan D. C. Lewis, one of the Nation's ace organizers of psychiatric research projects.

My column of last Feb. 10 was based largely on an interview with Dr. Lewis, in which he defended the practice of racial exclusion at the Institute principally on the ground that mixing races on the wards introduced an added biological element that hindered the pursuit of scientific research.

As a result of my column, a number of organizations and individuals sent protests to Gov. Thomas Dewey and Dr. Frederick MacCurdy, State Commissioner of Mental Hygiene. Mr. Walter White, head of the National Assn. for the Advancement of Colored People, addressed a letter to Governor Dewey, which was referred to Commissioner MacCurdy. 12-16-47

Commissioner Charges Writer With Error

The answer received by Mr. White was similar to those received by other protestants. It said, in part:

"The author of the PM article never approached the Department of Mental Hygiene either to request our policy or affirm as correct his reported interview. If he had, he would have found himself in error. . . .

"As to discrimination, our policy is one of non-discrimination throughout the Department. We have in the Institute at present many colored employes—laboratory technicians, secretaries, elevator operators and many in the housekeeping division. We have had on occasion colored social workesr. . . . We have never had a colored staff physician simply because none has ever applied. No qualified Negro physician applicant has ever been turned away. . . .

"There is no bias in patient selection."

Now, let's see on whose side the truth stands:

It happens that this reporter was not the first to raise the question of racial discrimination at the State Psychiatric Institute. It has been observed and protested for years by professional groups. Had Dr. MacCurdy consulted his records and his conscience, he would have found himself in error.

Wed. 12-16-47

Documentary Proof of Discrimination at Institute

Six years ago, a Negro college graduate applied for post-graduate instruction at the Institute's School for Psychiatric Nursing. She received this reply from Florence E. Newell, Superintendent of Nurses there:

"In reply to your letter, I am sorry to tell you that we are not prepared with our present set-up to accept Negro nurses for training."

On many occasions, social work students at the Institute have protested the absence of Negroes on the Institute wards, either as patients or as professionals. In April, 1946, a group of these students addressed a memorandum to Dr. Lewis, raising questions of discrimination at the Institute.

"These questions," they wrote, "arose out of our observation that there are no Negro patients at the Psychiatric Institute and apparently have not been for a long time; that there are no Negro student social workers and have not been, as far as we know."

To which Dr. Lewis replied, in part:

"Our selection of patients is determined by the kind of problems that are currently under way and this research at present *does exclude the mixing of races.* A hard fast rule in efficient research is the matter of uniformity in group studies and we cannot complicate our problems by injectiing such a diverse factor as the biological one of race. *This is not a statement in general disfavor of Negroes, but would include Orientals, Malays and any other diverse racial types.*"

Commissioner MacCurdy may toss off my charges as a reporter's distortion, but let him try to laugh off this documentary proof. And if he wants more, I'll let him have that, too.

P.S.—One month after my February column appeared, Dr. Lewis accepted for appointment as a staff resident a Negro woman physician—the first Negro appointment at the Psychiatric Institute. Cause and effect?

211 1947

TUBERCULOSIS WAR MAPPED IN HARLEM

The New York Times
New York, N.Y.

Plan for Experiments There With BCG Vaccine Is Outlined at Pediatrics Meeting

Fri- 7-18-47

SUCCESS IN EUROPE CITED

21X

Prejudice Against Prophylactic Widely Used Abroad Now Reported Waning in U. S.

Harlem, one of the worst reservoirs of tuberculosis in the nation, is likely to become a vast experimental laboratory for the vaccine BCG in a controlled fight against the disease, it became known yesterday at the close of the Fifth International Congress of Pediatrics at the Waldorf-Astoria Hotel.

Earlier in the discussions, scientists from Sweden, Canada, Russia, France, Poland, Brazil and Argentina unanimously reported favorable results with the prophylactic. The American point of view was given afterward to reporters by Dr. Milton I. Levine, Assistant Professor of Pediatrics at Cornell University Medical College and chairman of the advisory committee on BCG for New York State.

Reporting that his fifteen-member committee had recommended to the State Health Department that BCG be given in "heavily-populated areas where tuberculosis mortality is unusually high," Dr. Levine said: "In my opinion, Harlem undoubtedly would be one of the first sections to be given the use of BCG vaccine on a voluntary basis." Fri- 7-18-47

State to Provide Vaccine

He explained that the program in Harlem and in the Stuyvesant-Bedford section of Brooklyn would be directed by the city's Department of Health after being organized by the State Health Department, which would provide the vaccine. It is now being manufactured in the Division of Laboratories and Research at Albany, with Dr. Konrad Birkhaug, formerly of Norway, in charge.

The State Health Department announced some six months ago plans to experiment with BCG.

The immunization program for Harlem would affect an area where the tuberculosis mortality rate is almost four times as high as in the rest of the city. Dr. Levine pointed out that the vaccine was not harmful, but that the sentiment of medical experts in this country favored further experimentation. There are differences of opinion, he added, as to the extent of immunity provided by BCG, the proper dosage, methods of administering it and its potency when prepared on different culture media.

Other medical authorities also appeared impressed with reports of success with the vaccine in Europe and South America. They pointed out, however, that in combatting tuberculosis the United States had waged a winning fight by other, if less dramatic, methods. Europe and South America, on the other hand, have had fewer health facilities with which to fight the disease, hence have placed more dependance on BCG. More than 5,000,000 children throughout the world have received it. The Russians give it by law. Fri- 7-18-47

BCG stands for "bacillus of Calmette and Guerin." The vaccine, developed by Albert Calmette, French bacteriologist, and Camille Guerin, French surgeon, in 1909, from a strain of bovine tuberole bacilli, was reported in 1920 as harmless to man. It received a tremendous setback, however, in 1929 in Luebeck, Germany, when 270 German infants received the vaccine and seventy-seven died. It turned out that the vaccine contained a strain of virulent tubercle bacilli that had been placed through carelessness in the same incubator with the BCG.

Prejudice Waning Here

Reluctance to use the vaccine in America has been broken down recently with the decision of the United States Public Health Service to vaccinate 100,000 or more Americans with it. The program got under way two months ago in Columbus, Ga.

Prof. Arvid J. Wallgren of the Royal Caroline Medical Institute, Stockholm, told the congress that BCG vaccination "fills a gap in the fight against tuberculosis and must be regarded as a valuable complement for rational anti-tuberculosis work." Other foreign doctors who endorsed BCG included Dr. Karel Jonscher of University Children's Hospital, Poznan, Poland; Dr. A. F. Tour, correspondent member of the Academy of Medical Sciences of the U.S.S.R.; Dr. B. Weill-Halle of Paris; Dr Alberto Chattas of Cordoba, Argentina, and Dr Adamastor Barboza of the Instituto Nacional de Puericultura, Rio de Janiero, Brazil.

The Findlay Medal, a Cuban award, was presented last night to Dr. Henry F. Helmholz of the Mayo Clinic, Rochester, Minn., retiring president of the congress, for his outstanding contributions to pediatrics. Among speakers at the dinner in the Waldorf-Astoria were Dr. Wallgren, Dr. Lee Forest Hill, president of the American Academy of Pediatrics; Dr. Victor Escardo, Anaza, Uruguay, and Dr. Robert Debré of the University of Paris. Two thousand delegates from sixty nations attended the four-day meeting, the first in ten years. Fri- 7-18-47

Special Committee on TB Votes to Disband Itself

211 Afro-American
Baltimore, Md.

NEW YORK (ANP)—The committee on the program among colored persons of the National Tuberculosis Association meeting at the Hotel New Yorker here last Monday decided to discontinue its activities. Sat.

The committee of which Dr. Charles S. Johnson of Fisk University is chairman, expressed itself as feeling that the time had arrived for NTA to integrate the work of the staff as well as efforts covering activities among colored persons into the various departments of the association rather than handling them as a separate division. 12-20-47

Specifically, the program will be included in the overall program development service. James G. Stone is director of this service with Miss Mollie Faison, an assistant, who will be the direct liaison person.

The committee, formed 16 years ago with the help of the Julius Rosenwald Fund, which contributed toward its support for a number of years, was developed at a time when the percentages of tuberculosis among colored persons were alarmingly greater than among whites and little was being done about it.

The group concentrated on programs of education about the great white plaque among colored people. Together with Dr. Cameron St. C. Guild, director of special programs, it was a factor in stimulating informative programs and pressures on State tuberculosis associations and health departments in Southern States.

Sat. 12-20-47

The resolution adopted Monday extolled the work of the committee and staff in the past, but made it clear that the committee felt the time had arrived for the NTA to assume complete responsibility for all work among colored persons. Sat 12-20-47

In attendance at the meeting besides Dr. Johnson were:

Dr. W. Roderick Brown, Pittsburgh; Albert W. Dent, New Orleans; Miss Fannie Eshleman, R.N.; Philadelphia; Mrs. W. T. Dorough, State TB director, Arkansas; Dr. J. R. Heller, U.S. Public Health Service; Claude A. Barnett, Chicago; Theodore J. Werle of the University of Michigan; Miss Faison and Mr. Stone.

Birmingham Opens War On TB Among Its Negro Population

The Negro Birmingham Mirr. 4-12-47

BY J. MORGAN SMITH
Associated Press Staff Writer

For the first time in the history of the country, a large city is undertaking to X-ray its entire Negro population for evidence of tuberculosis.

Health authorities say such a program has been launched here because tuberculosis kills more persons than all other communicable diseases combined and because three times as many Negroes die of it as do whites.

It is significant, these authorities believe, that the whole campaign is being handled by Negroes, with Negro nurses and technicians taking the X-rays and Negro clerical help keeping all records.

The campaign is more evidence that Birmingham has become one of the most health conscious cities in the country. It was here that the first mass syphilis blood test was undertaken in a campaign that lasted eight weeks and during which more than 300,000 citizens bared their arms to the needle.

* * *

THOSE WHOSE X-RAYS show positive in the tuberculosis campaign will be checked again, and if the disease is present, the victim will be placed in a sanitorium.

That sounds like a big order. K. W. Grimley, executive secretary of the Jefferson County Anti Tuberculosis Association, agrees that it is. It will require four years, but it can be done, Grimley said.

"A white man can have tuberculosis for years and live without apparent effects, but tuberculosis races through a Negro's lungs at an astonishing rate, and in no time at all the victim dies. Consequently, most of the tuberculosis we find here will be in the early stages where cure is probable," he added.

To start the job, a portable photo-roentgen X-ray unit mounted in a truck was driven to Negro gathering places and parked in each spot for two hours.

The campaign was launched during National Negro Health Week March 31 to April 6 at the Famous Movie Theater in Birmingham's Little Harlem, a section brought to the fore by that dusky character of fiction, Florian Slappey, created by Octavus Roy Cohen.

On opening day, April 6, the Famous had billed a favorite among the Negro population—Humphrey Bogart—in "The Big Sleep." To this was added a short subject of Dorothy Maynor, noted Negro soprano, in "A Message From Dorothy Maynor About TB."

The Negro singer voiced a plea for persons in the audience to have X-rays made of their chests.

AT THE CLOSE of her performance, an announcer told the patrons a photo roentgen unit was parked outside, and the X-ray was free. The response was terrific.

A line formed for a solid block on Fourth Avenue. Each X-ray required only a minute, and by nightfall that first day, approximately 500 Negroes had stepped before the camera.

Following the pickoff at the Famous, the truck on subsequent days was move about the city, parked in front of schools, housing projects, churches, cafes, funeral homes, pool halls, recreation areas.

The News

Thus the Birmingham Health and Negro TB Association under the direction of Robert Coar, executive secretary, in cooperation with the Jefferson County Anti-Tuberculosis Association, has put in practice an idea that might well be carried out in other cities of the South.

It is estimated there are about 120,000 Negroes in Birmingham.

The photo-roentgen unit can X-ray approximately 500 a day.

If former statistics hold up, about 400 Negroes will have to be sent to Sanitoria in this district. Grimley said beds were available to accommodate that number. Not all these victims, of course, will be admitted at the same time. Some will be cured before others arrive, for in early stages, TB can be arrested in six months. A small percentage of the victims in the advanced stages are destined to die.

* * *

THE IMPORTANT THING about this campaign is that it is striking at TB where its incidence is highest.

The News

"If we keep X-raying people," Grimley said, "sooner or later we will have no more TB, because all the cases will be wiped out. No one is born with it; you catch it from someone."

He pointed out that in 1945, 52,000 persons in this country died of tuberculosis. In 1935, he said, 70,000 died of it.

"That's progress," he declared. "We can cut that even more in the next decade. You see, we're working on the axiom that no home is safe until all homes are safe."

The Negro Battle On TB

The Negro

The story of the fight of Birmingham Negroes against tuberculosis, with the help of the Jefferson County Anti-Tuberculosis Association, drives home the conclusion that Negroes, when given a chance to help themselves, respond with vigor. Given a course to follow, with a reasonable explanation of the benefits to themselves of such a program, colored people of this community again have provided a practical demonstration of their desire to improve their chances for health and happiness.

The anti-tuberculosis campaign currently under way aims to get as many as possible of our Negro citizens before a portable photo-roentgen X-ray unit. This unit, mounted in a truck, is being moved about to various parts of the city so that it may be handy to the great majority of Negroes. This is a sound technique, as has been proved many times—taking medical assistance directly to people who need it.

Birmingham, Ala.

Many young Negro veterans know well the value of frequent medical inspections. As did thousands of white veterans, they received a continuous medical care in the armed forces many never had enjoyed before. They know definitely that this pays off. Undoubtedly Negro veterans in Birmingham would be doing their fellow citizens a praiseworthy service by "talking up" the current X-ray campaign.

Tues. 4-15-47

We might well look beyond this immediate campaign and translate this method of attack on disease into other means of raising health standards of all our people. Certainly improvement of basic living conditions is one such method. The better homes, the better all-round medical care, the more attractive and pleasant environment our Negro citizens may enjoy, the higher will be the health standards for all of us. This is a primary lesson we should have learned thoroughly by this time.

South Jamaica to Be X-ray Survey Site

21L The American Baltimore Md.

NEW YORK—South Jamaica has been selected by the Queensboro Tuberculosis and Health Association for its most extensive community X-ray survey to date, which will be held June 11, 12, 13, and 14.

The surveys, conducted in cooperation with the Department of Health, have been made in four other Queens communities. They consist of free X-ray service offered all residents and are designed to locate undiagnosed cases of tuberculosis.

Tues. 5-24-47

Machines will be set up at Public School 40, 48, 50, and 116, where X-rays will be taken from 3 to 5 p.m. and 7 to 9:30 p.m., except on June 14, when the hours will be from 1 to 5 p.m.

TUBERCULOSIS AND THE NEGRO

21L The Christian Index

By William A. Beck, M. D.
Professor of Clinical Medicine, Meharry Medical Colege, Nashville, Tenn.

Jackson, Tenn.

Delivered on Wings Over Jordan Program, July 12, 1942

Thur. 3-6-47

Some day historians will record the fact that the Negro's tuberculosis case finally got a hearing at the great bar of justice. Without a doubt this dreaded disease is coming under control. However, the length of time needed to accomplish this feat will depend wholly on the vigorousness with which we concentrate our attack on those areas and groups of people among whom the disease flourishes. Briefly speaking:

1. Tuberculosis is still the leading cause of death in the age period of 15 to 45 years.

2. In the past 30 years the mortality rate for the white race has been reduced from 1st to 7th place, whereas, the mortality rate for the colored race has only been reduced from 1st to 2nd place.

3. There are 250,000 active cases of tuberculosis among Negroes, and 260,000 silent cases.

4. Tuberculosis in Negro children deserves special emphasis since the greatest disparity between tuberculosis in the white and Negro is manifested in Negro children.

Absoultely no program for the control and eradication of tuberculosis can hope to be successful unless the opportunities for hospitalization and facilities for treatment are available equally to Negroes and to whites.

An excellent picture of the inadequacy of hospital beds and facilities for the treatment of tuberculosis Negroes can be seen from the following statistics from the National Tuberculosis Association: There were 15,883 deaths in 1940, with a bed capacity of 7,066 specifically for Negroes. In the 13 southern states, where two-thirds of the nation's Negro population lives, a still more serious condi-

This will be another example of the Florida good that can be accomplished by

separate opening the doors to Negroes.

patients There is a wealth of clinical mate-

rial in all of the tax supported tu-

berculosis and general hospitals of

has this country; if provisions for Negro

ro physicians and nurses. Florida

er scale, an opportunity for study

tensive ing in- and observation in these institutions

Texas, and Kentucky. These states tuberculosis program that is being

have separate tuberculosis hospitals augurated in Tennessee at present. would be a great step forward for

15,883 deaths annually and with only

7,066 beds—8,817 human beings are

sacrificed at the altar of insufficient

accommodation.

An example of the southern states

taking the lead in solving the prob-

lem of tuberculosis among Negroes,

mention may be made of Arkansas,

and Negro physicians are permitt

on the staff.

Governor Prentice Cooper h

promised participation by Negro ph

sicians and nurses in the extens

America. Thurs. 3-6-47

There could be no better approach to conquering this deadly germ than to provide better training for Negro physicians and nurses in the modern methods of handling it. A much greater opportunity for clinical experience is necessary, if we are to reach a goal of training enough Negro physicians to cope with this scourge.

While the enterprising Negro general surgeons of the South have done a Herculean job with respect to phrenic nerve operations, thoracic drainage, rib resections and the like—especially trained chest surgeons are acutely needed. As far as I know we do not have a single well trained Negro chest surgeon in all the Southland. The North and Eastern sections have provided about six recognized Negro chest surgeons.

This arbitrary goal requires that within the next five years, in a given community of a sufficient number of Negroes, at least one Negro physician must be trained to administer pneumothorax treatments; and during a second five year period we must have at least one well trained Negro chest surgeon for every large Negro populated center. Thurs. 3-6-47

We would like further—to have established at Meharry Medical College and Howard University, great centers of post graduate training in tuberculosis. Students would then become more tuberculosis conscious. Physicians in practice could return for advanced training, and many could be encourged to do valuable research in the field.

The Negro physicians of this country are pleading to hospital boards, hospital administrators, health officers, public spirited citizens, and to the great medical profession of these United States of America, for permission—in a larger measure—to acquire adequate knowledge and training, so that we may help to stop tuberculosis which is the axis enemy here in America.

Whites Refuse To Live In Alley Dwellings

The Weekly Review Birmingham 21B

NEGRO TB DEATH RATE DROPS 55.2 PER CENT

Sat. 6-28-47

The concluding statement in the 1947 Report of the Birmingham Health Association reads:

"When we began operation ten years ago, there were in Jefferson County 28 sanatorium beds provided for Negroes. Today, we are happy to report that there is in use at the sanatorium now 92 beds, or an increase of 68 beds costing approximately $1,000.00 per bed, per year for maintenance. The most hopeful sign that there has been progress in these ten years is reflected in the annual death rates which show these encouraging figures. Ten years ago, for instance, the Negro death rate was 160.3 per cent per 100,000 population. At the close of 1946 this rate had decreased to 95.1 per cent. This represents a 65.2 percent decrease in a short span of a ten year period. In other words, out of every 100,000 persons 65.2 per cent Negroes are saved today, each year, who ten years ago would have been dead from tuberculosis. This is compared with a white death rate of 29.2 per cent as compared with todays white death rate of 22.2 per cent representing a decrease of only 7 per cent as compared with our 65.2 per cent decrease.

Your tuberculosis association is proud of this progress and takes pride in feeling that in a very small way, we too have helped in making our community a healthier and better place in which all of us might live."

Sat. 6-28-47

At Wednesday night meeting of the Association the following Board members were elected: Dr. H C Bryant, Messers A L Welch, Robert Durr, E O Jackson, Norman Randall, W J Moore, Dr. W L Brown, Reverends H R Hughes, J L Ware, W L Varnado, Mrs. Rosa Terry Brown, Drs. M G McCall, A S Mitchell, Messers A B White, Clifford Ross, Mrs. Carrie Ozan, Dr. Herbert O Mathews, Mr. H Lee Roberts, Miss Kathryn Fowlkes, Messers Lorenza Cates, Richard Hall, Mrs. Mamie LaBon, Mr. George W Pearson and Rev. H B Gibson. Sat. 6-28-47

Commenting on the outlook for tuberculosis, Dr. Mitchell told the group that in 20 years tuberculosis would be yhipped in Jefferson County if present preventative strides are maintained. He called attention to the importance of lifting restriction, to the end that colored people may live in sections where drainage is better instead of in hundreds of allies, as is the case now where they are doomed to health hazards galore. Said he, there was a day when fine trees grew in Negro communities, but that most of them are so treeless they look as if an atomic bomb has hit them.

Mr. A B White who has headed the T.B. football promotion for the Association the past two years made some pertinent observations on T.B. as it relates to alley dwelling. He stated that alley houses for the most part pay 90c on the dolars four years after being built; that there is no form of investment which pays more than Negro alley houses but that the dwellers therein pay more for housing, in doctor bills, degradation and destruction of personality than those living on the best streets in the best communities of the city.

Dr. H. C. Bryant raised the question as to how those dwellings in the allies might be made to want to move out. Education was passed as the answer.

The alley dwelling situation in Birmingham and most Southern large cities are a menace to the general welfare. 99 per cent of all alley DWELLERS are Negroes. Observation was made at the meeting that alley DWELLINGS Sir A D Shores, Grand Attorney are built especially for Negroes, and that accounts for the fact that very few have ever seen a white family crammed into an alley, and the fact that tuberculosis and social diseases plague the Negro so destructively.

Sat. 8-23-47

TB ASSOCIATION HONORS DRS. DENT AND BALLARD

Afro-American

SAN FRANCISCO (ANP)—Dr. A. W. Dent of New Orleans was elected to the executive committee of the National Tuberculosis Association here Friday, and Dr. Orville L. Ballard, Louisville, was named to its board of directors.

Savannah, Ga. Press
July 25, 1947

BOOKS ARE GIVEN TO T-B SANATORIUM

EDUCATION DEPARTMENT MAKES DONATION TO NEGRO PATIENTS

21B

The Chatham-Savannah Tuberculosis Association has received a large shipment of elementary school books for use in the local colored sanatorium, it was announced today by Joseph A. Mendel, chairman of the public relations committee of the association.

The books were received from the vocational rehabilitation division of the State Department of Education, through the efforts of C. B. Shroyer, who is charge of T-B work on the state level, and G. E. Currie, senior counsellor for the Savannah area.

These books will enable Sadie Gardner, the teacher at the sanatorium, to carry on a much more thorough program with the patients, as the books are the same as those used in the public schools throughout the state, it was stated.

Many varied activities are being carried on along with this program at the sanatorium. Among these are monthly birthday parties for the colored patients, for those who have celebrated their birthdays during the month. The cakes for the affairs are furnished by the Derst Baking Company.

Sadie Gardner has organized a hospital committee which has visited the hospital to see what can be done to assist in the program. At the present time members are providing materials necessary for hand crafts and will assist with the various activities centered around these crafts. As Miss Elizabeth Hogan, health education secretary for the local group, pointed out, the idea that someone is trying to help them, and is aware of their conditions is as of much benefit to the patients as the actual giving of time and

Declining T-B Rate Noted in Knoxville

St. Louis Argus
Oklahoma City Black Dispatch, Sat 8-9-47

KNOXVILLE, Tenn. — (ANP) —Only 20 cases of tuberculosis in 1946 were discovered among 3,081 foodhandlers in this city, according to statistics just made public by the city health bureau. All handlers of food are required to submit to chest examinations and new equipment has been installed for this purpose.

21B

For the first time in the history of the city, the TB rate was practically the same for the two racial groups. Negro medical men and women have aided greatly in this reduction of morbidity and mortality. There are five colored physicians, one dentist and four nurses serving full or part time in the public health service. A competent Negro physician serves as a full staff member on the municipal hospital board. Sat 8-9-47

Among the general population, heart diseases still lead as the greatest killer, with cancer ranking second and constantly climbing. Among Negroes, however, cerebral hemorrhage was the second highest cause of death, with homicide, pneumonia and cancer holding third place. Cerebral hemorrhage held third place among the whites.

Show Decline In TB Rate In Knoxville Area

Chicago Defender
Chicago, Ill.
Sat. 8-9-47

By DR. O. B. TAYLOR

KNOXVILLE, Tenn.— (ANP)— Only 20 cases of tuberculosis in 1946 were discovered among 3,081 foodhandlers in this city, according to statistics just made public by the city health bureau. All handlers of food are required to submit to chest examinations and new equipment has been installed for this purpose.

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44 Informer Employes Out; Union Blamed

Pittsburgh, Pa. Courier
21L
S27. 6-21-47

HOUSTON, Texas — Spokesmen for forty-four former employes of the Houston Informer, local semi-weekly paper, declared last week that the workers are jobless now as the result of being "let down" during a strike which began last Wednesday, because of inefficiency on the part of leadership in the local CIO union.

Workers' leaders told The Courier that they walked out of the plant on orders from the local CIO office. The CIO refused to issue a statement on the matter as late as Saturday evening. Carter W. Wesley, owner of the paper, said forty-four workers staged a wildcat strike in violation of an NLRB order.

He stated that an agreement had been made in the Ragional NLRB office and signed by himself and A. R. Hardesty, regional director of the CIO, in which the workers were given a five-day period to register acceptance or rejection of conditions set up. Under conditions now existing, Mr. Wesley says he no longer considers the strikers plant employes.

LOSS IN ADVERTISING

Shortly after the walkout last week, pickets were placed around the plant, but were removed following a meeting Thursday, after which they said the CIO had disclaimed them. Mr. Wesley states that much of his plant's machinery had been damaged by the workers prior to the walkout, and considerable advertising loss had been sustained. S27.6-21-47

The Informer, published by the Freeman Publishing Company, also publishes the Dallas Express and the San Antonio Informer. The week-end edition of the Houston edition of the Informer came out in an abbreviated eight-page effort.

Mr. Wesley told The Courier that he originally planned to sue the CIO and the striking workers, but added that a committee had seen him and declared that they no longer belong to the CIO but are independent union members.

DR. JOHNSON REELECTED

NEW YORK (ANP) — Dr. Charles S. Johnson, president of Fisk university, Nashville, has been reelected a vice-president of the American Social Hygiene association, it was announced here this week. The association, sole national voluntary agency leading the fight against the venereal diseases, is headed by Dr. Ray Lyman Wilbur, chancellor of Stanford university and secretary of the interior under the Hoover administration.

Blood Tests Begin In Elmore County

WETUMPKA, ALA., Jan. 4.—The Elmore County Health Department has designated Jan. 13-25 as the date for making blood tests for social diseases. Clinics will be held in every section of the county for both whites and Negro citizens between the ages of 14 and 50.

W. G. Blassingame, who has charge of the work in the county, says the law provides a fine for those failing to take the test. In case of illness, a certificate must be obtained from the physician.

Blame Jimcrow For Harlem VD

The alarming rise in Harlem's venereal disease rate was laid to the segregation and discrimination existing in the community by the Conference of the Harlem Council on Social Hygiene held Saturday at the Hotel Theresa.

The Conference was addressed by Dr. Israel Weinstein, City Health Commissioner, who called for the cooperation of the press and all community organizations in combatting VD.

The Council's report declared that the people of Harlem can be given the facts about inspection, prevention and treatment of venereal diseases "but it is incumbent upon all of us to see that the negative social conditions existing in the community are eradicated."

"As long as Negroes are relegated to ghettoes, discriminated against in employment and denied the best educational facilities," the reported stated, "it may be expected that disease rates among them will be disproportionately high.

Dr. Theodore Rosenthal, director of the city's Bureau of Social Hygiene, deplored the Board of Education's policy of refusing to provide schools with social hygienic education. He said the Health Board had "time and again" asked for the institution of such education but had always been refused.

Scientist Reports Quick Cure for VD

CHARLOTTESVILLE, Va. — A single treatment for the cure of gonorrhea was reported at the meeting of the Virginia Academy of Science here last week.

The Academy members were told that the curative drug is penicillin coupled with a new chemical compound which makes the penicillin remain in the blood stream long enough to get maximum results.

Cure Absolute

The report was made by Dr. Samuel A. Vest, head of the urology department of the University of Virginia, who said that 34 out of 36 cases had been cured at the hospital after a single dose of the new pills had been taken.

The new synthetic arrests the kidneys' functions, thus making it possible for the penicillin to remain for a longer period in the system, Dr. Vest explained. He expressed the belief that in a short time this treatment for VD will come into general use.

How Goes the Fight Against VD?

WHEN REPORTER JAMES FREE wrote a series of eight articles on syphilis in THE TIMES-DISPATCH in 1937, the appearance of the word in print was an innovation. DR. THOMAS PARRAN, surgeon-general of the United States, had just started his campaign to bring discussion of the disease into the open, and State health authorities were casting about for funds with which to press a full-scale attack against it.

That attack commenced in 1938 after the General Assembly granted funds of $22,000 for the newly created Division of Venereal Disease Control of the State Department of Health.

There were good arguments for it. As one of the States in the "venereal disease belt," which includes the Southeastern and Central States, Virginia had between 162,000 and 200,000 cases of syphilis alone. This was the estimate of DR. L. J. ROPER, then assistant director of the division and now director of the State Health Department, and it has been abundantly confirmed since. Ten sample surveys throughout the State at that time showed an infection rate of 11.4 per cent among Negroes and of 5 per cent among whites.

The subsequent nine years' fight has shown how stubbornly entrenched syphilis is among the poorer element in this State. Despite the expenditure by State, Federal and local governments of increasingly larger sums, amounting last year to approximately $1,000,000, there has been no decrease in the prevalence of the disease. But there has been—and this is the significant effect of the campaign—a reduction in the number of infectious cases.

The Virginia campaigners decided early in the game to go after these. The best use of available funds and manpower, they decided, would be a concentration against virulent cases, rather than a dispersion of funds in an attempt to bring to light latent syphilis. In this respect Virginia's effort has differed radically from the mass examinations and mass treatment in Alabama's and Georgia's well-publicized "splash" campaigns.

Last year the infectious syphilis in Virginia was the lowest in 10 years. Of the 12,021 cases, the Division of Venereal Disease Control treated some 7,300 in rapid treatment centers, and provided free drugs for treatment of others by private physicians. Experience has shown that few of these cases will cause trouble again, unless reinfection occurs.

The fact that the total syphilis rate remains about the same does not discourage health officials. They believe that many of the cases which show up each year as "new" are actually old ones just coming to light, and that by dealing gradually with the accumulation they will conquer the disease. A second factor in the persistence of syphilis, they are convinced, is the migratory nature of Virginia's population in the war years. Mass examinations of Selective Service registrants brought to light cases which would not otherwise have been uncovered.

Other means which have been useful in detecting the malady are the premarital blood tests required by State law since 1940, examinations of food handlers, industrial surveys, hospital examinations, physicians' case reports, nurses and investigators' case finding, Army separatees' reports, and police court investigations. Latent syphilis has even been detected by examination of prospective Red Cross blood donors.

The Virginia program has shown that syphilis is to be found wherever one finds ignorance and poverty. The rate among Negroes and whites of equal economic level is about the same. The prevalence of the disease among the large number of Negroes of Southeastern Virginia is a direct measure of their low economic status.

Using present means of detection and penicillin cures, health officials say Virginia's syphilis problem will be brought under control as an infectious disease within the next 10 or 15 years. Gonorrhea, which is less easily detected, will be a more persistent evil.

RISE IN VD SHOWN FOR HARLEM AREA

Health Officer Asks Curb Aids, With 25% of City's Total Traced to His District

BY GEORGE STREATOR

Estimates for the first six months of this year and final reports from last year show a marked increase in venereal diseases for the Harlem area, Dr. Vernon A. Ayer, district health officer for the Central Harlem Health Center of the New York City Department of Health, 2238 Fifth Avenue, reported yesterday.

The behavior problems of those between the ages of 15 and 24, and the large number of repeaters who talk about the ease of modern cures, enlarge the problem that was checked somewhat among mature persons during the war, Dr. Ayer said. Last year, 13,062 or 25 per cent of the 52,031 VD cases reported for the entire city came from Central Harlem, his figures showed. Dr. Ayer said he thinks the problem especially for the young people, "is moral more than economic." It is a matter of educating the Negro, he asserted, as he produced figures showing that Brooklyn's "Little Harlem," parts of the Bedford district, also accounted for 5,540 VD cases, or, about 9.4 per cent of the number of reported cases for the city as a whole.

Laxity Traced to 'Carry-Over'

The "mores and folkways of the Southern and West Indian Negro are largely a carry-over from slavery, when there were for our people no moral codes," Dr. Ayer said. "But whatever the cause and the background, we have a present-day problem to solve in a modern city.

"Too much faith has been placed in 'quick cures,' and young people in this area tend to overlook the moral side of the issue," he declared. "Perhaps they would be better off if they were working and less crowded, but they need discipline."

Last year's records for the city showed that 7,265 between the ages of 15 and 24 were reported for syphilis, 2,057 of them residing in Central Harlem. There were also 12,989 cases of gonorrhea recorded for the city, and 3,447 of these, about 27 per cent of the total, were also in Central Harlem.

Dr. Ayer said that the East Harlem Health District presented a different picture. This area, which lies east of Third Avenue down to 119th Street, and east of Fifth Avenue down to Ninetieth Street, is bounded on the east and north by the East and Harlem Rivers. Many races reside there and comprise both lower and middle-class and low-income groups. The general degree of infection by VD in this area ranges from 5 to 6 per cent of the total for the city.

Help By Churches Urged

Dr. Ayer asked for more cooperation by churches and civic organizations in making possible a greater participation by the schools in sex education. He said that "under proper moral safeguards and restraints, this type of education belongs in our public school curricula."

A decrease in tuberculosis and other diseases can be expected with better housing, and improved employment, Dr. Ayer said. He maintained, however, that VD is something that the community does not wipe out with better wages and improved housing "unless there is a moral tone not found in our community today."

Harlem Hospital, Lenox Avenue and 136th Street, opened this week a special fifteen-bed section for rapid treatment of VD. Previously, Bellevue Hospital had the only rapid treatment facilities in public institutions.

RISE OF V. D. IN HARLEM IS INDICATED

Atlanta, Ga. Daily World
21m
Sat. 7-12-47

NEW YORK — (A N P) — Dr. Vernon A. Ayer, district health officer for the Central Harlem Health Center of the New York City Department of health, stated here that the reports showed a marked increase in venereal disease for the Harlem area.

According to Dr. Ayer, the behavior problems of those between the ages of 15 and 24, and the large number of repeaters who talk about the case of modern cures, enlarge the problem that was somewhat checked among mature persons during the war. He further indicated that last year, 13,602 of 25 per cent of the 52,031 VD cases reported from the entire city came from Central Harlem according to his figures. Sat. 7-12-47

The "mores and folkways of the Southern and West Indian Negro are largely a carry-over from slavery when there were no moral codes for our people. Whatever the cause and the background, we have a present-day problem to solve in this modern city," said Dr. Ayer.

Help by churches and more cooperation from civic organizations would make possible a greater participation in sex education, it was felt.

The health officer emphasized the fact that a decrease in tuberculosis and other diseases may be expected with better housing and improved employment but that venereal disease was something that the community does not wipe out with better wages and improved housing unless there is a moral tone not found in the Harlem community today. Sat. 7-12-47

Circumcision and VD

21m Mon-7-21-47

Although many doctors agree that men who are circumcised are not likely to contract venereal diseases, little has been published in medical journals to confirm or deny this. In 1855, Jonathan Hutchinson, a British physician, first observed that syphilis and gonorrhea were uncommon among Jewish people. This was confirmed by studies at the Metropolitan Hospital, New York, in 1882-83, where syphilis was found to be four times more common in gentiles, and more recently, in a survey of New York City vital statistics which showed this disease to be only a third as prevalent in Jews of both sexes. Circumcision, which is almost universal among Jews, was thought to be the cause of this difference. Newsweek

During the second world war, Dr. Eugene A. Hand, then a lieutenant commander in the Naval Medical Corps, now a practicing dermatologist in Saginaw, Mich., made an extensive study of the relation between circumcision and venereal disease. Dayton, Ohio

Hand got his material from the venereal clinics of a military hospital near New York, and consequently, his study includes a large percentage of gentiles, Jews, and Negroes. His sensational findings, heavily documented, were presented last month to his fellow dermatologists at the annual meeting of the American Medical Association in Atlantic City. Among the more significant revelations were:

▶ From a group of 790 gentiles, 525 Jews, and 76 Negroes who had never had venereal disease, it was found that 34 per cent of the gentiles, almost 100 per cent of the Jews, and 42.2 per cent of the Negroes were circumcised. Mon-7-21-47

▶ Of 522 gentiles, 16 Jews, and 544 Negroes who gave a history of gonorrhea, 23.6 per cent of the gentiles, 100 per cent of the Jews, and 13 per cent of the Negroes were circumcised. The percentage of gentiles and Negroes with gonorrhea who were circumcised was definitely lower than for like groups who never had contracted venereal disease.

▶ The diagnosis of syphilis was usually made earlier and more easily in the circumcised, with a resulting better chance of final cure. Chancroids (virulent, contagious ulcers) combined with the primary syphilitic sores were seen in the uncircumcised but almost never in the circumcised. On the average, the primary sores in the circumcised healed more rapidly than in the uncircumcised.

▶ Certain forms of cancer were less common in Jews and circumcised gentiles. These included: (1) cancer of the tongue, because with syphilis rarer in these groups, there was less precancerous irritation of the mouth; (2) cancer of the male reproductive tract, because of the absence of syphilis, and (3) cancer of the uterus in sex partners of the circumcised men, because syphilis with precancerous changes and also gonorrhea with chronic infection were less common.

▶ There was little relation between the body build types and the occurrence of venereal disease. Instead of being present among the pyknic, or hyper-gonadal type (short, stocky rounded figure with broad face, and large head and chest), the tendency veered toward the normal type (broad shoulders with strong muscular development, prominent chest, and large feet and hands) and the schizoid, or mixed type, to which group a large proportion of the Negroes belonged. Mon-7-21-47

There was a definite relation between financial status and education, and the practice of circumcision, Dr. Hand said. He explained that, in general, the sex education of the Negro is meager, his sex habits promiscuous, and his acceptance of venereal disease without fear or social taboo has increased the infection rate for his race to almost 100 per cent. For the wisely educated Jew, circumcised at birth, the venereal-disease rate has remained the same or decreased so that his chance of infection has lessened. Between the two extremes lies the gentile with a circumcision rate probably higher than the Negro's, a better financial and educational background with better sex knowledge, plus a somewhat less promiscuous sex life. This has kept the gentile venereal rate much lower than the Negro but still higher than the Jew.

and the lowest in the Great Lakes Naval District.

SYPHILIS IN GREENLAND

Afro-American Baltimore, Md.

A white American soldier, blamed for spreading syphilis among four women in Greenland, has been removed, according to reports from the Danish colony. 21m

It looks like history is repeating itself. British and European medical authorities, and some historians have long since recorded the fact that the natives of Asia, Africa and the Pacific knew nothing of venereal diseases until pioneering whites introduced miscegenation to them in their search for slaves, gold, diamonds and other commodities of trade.

Our detractors like to use statistics to show that the incidence of venereal diseases among colored persons is higher than that among whites. The item from Greenland, therefore, is worthy of more than passing attention.

Camp Lee's VD Control Program Meets Success

Afro-American Baltimore, Md. 21m
Sat. 7-26-47

Rate of Disease Reduced to Lowest Point in History of Post by Concerted Campaign

CAMP LEE, Va.—Camp authorities announced this week that veneral disease rate among the troops at the post had reached the lowest point in the history of the installation's existence.

Since January, when the number of VD cases among personnel reached serious proportions, the efforts and initiative of the troops here have resulted in a reduction of approximately 70% in the VD rate among their units. Sat. 7-26-47

In January the ratio of VD cases among the colored troops, as compared with white troops, was 10 to 1. Today, six months after the drive to reduce VD went into effect, the ratio is 4½ to 1.

3 Non-Coms Given Credit

In January, 87 cases of venereal disease were reported among the colored troops. Last month that number had dropped to 9, and so far this month only one venereal disease case among colored troops has been reported at the post.

Much of the credit for the achievement goes to two noncommissioned officers, T/Sgt. Harold McCray, S/Sgt. Theodore Brockman and Pfc. Albert Mitchell, who suggested the establishment of an NCO VD Council to deal with the problem. Sat. 7-26-47

Under the direction of this group, monthly meetings are held at which the VD problem is discussed openly and frankly. To maintain interest in the program, the camp is presenting awards each month to those companies having no VD cases.

VD Rate in Navy Extremely High

Afro-American Baltimore, Md. 21m

WASHINGTON (NNPA) —The venereal disease rate among colored Navy personnel in the continental United State is more than 10 times the rate among white Navy personnel, statistics released last Tuesday by the Bureau of Medicine and Surgery of the Navy Department showed. 10-11-47

The Navy statistics showed that the incidence rate of venereal disease among colored personnel is 484.5 per 1000 and among white personnel, 46.9 per 1000 The tuberculosis incidence rate was three times higher among colored Navy men also, it was revealed. Sat.

The bureau reported that the highest rate of incidence is in the Sixth Naval District, comprising States of South Carolina, Georgia and a large part of North Carolina,

21n 1947

Roanoke, Va., Times
February 9, 1947

Cancer Fellowship Awarded (21n) To Young Negro Physician

Roanoker to Specialize in Radiation Therapy

Dr. Julian I. Gilliam, young Negro doctor of Roanoke and son of Mrs. Elizabeth B. Gilliam, 202 Wells avenue, N. W., is the first to be granted a fellowship by the Virginia Cancer Foundation and last Monday started a year of post-graduate study at New York university. Dr. Gilliam will specialize in radiation therapy at Bellevue hospital under Dr. Ira Kaplan.

To Set Up Clinic Here

Upon completion of the course, Dr. Gilliam is expected to return to Roanoke to assist in a tumor clinic, which will be established in connection with Burrell Memorial hospital.

In commenting on the proposed clinic, Dr. L. C. Downing, hospital superintendent, said yesterday that such a clinic will be set up but plans depend on obtaining radium. The superintendent explained that the hospital is now in correspondence with "a certain branch of the government" requesting a loan of government-owned radium.

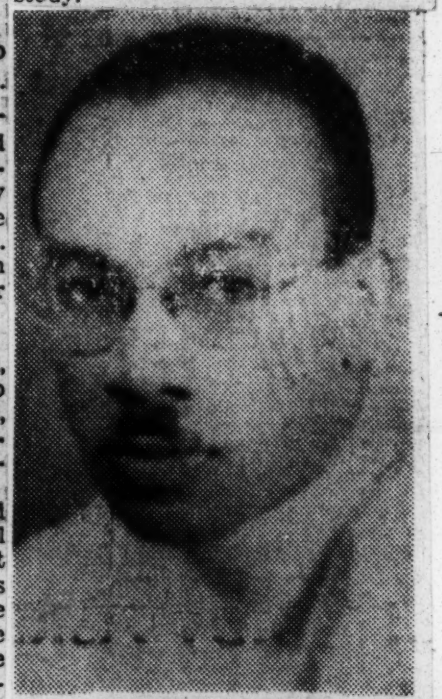
Dr. Gilliam is a native Roanoker, who graduated from Lucy Addison high school. He studied at Hampton institute and at Lincoln university before taking up medicine at Howard university. Following graduation he served the internship and assistant residency at the Provident hospital in Baltimore. Dr. Gilliam's father is the late W. A. Gilliam, who was a retired mail carrier prior to his death.

The Roanoker was one of three applicants for the fellowship recommending by Dr. Downing, who is a member of the Virginia Cancer Foundation's executive committee.

First of Series

Dr. James R. Cash, University of Virginia pathologist who is chairman of the Virginia Cancer Foundation's fellowship committee, in announcing the award to Dr. Gilliam expained that this was the first of a series of such grants to be made with the hope of providing better diagnosis and treatment for Virginians suffering from cancer. These fellowships for advanced medical study are open to both white and Negro doctors.

The fellowship of the Virginia Cancer Foundation carries a stipend of $3,600 for the year. So interested are the New York university authorities in this project to train young cancer specialists that they have remitted the fees usually charged for a year of post-graduate study.



Dr. Julian I. Gilliam

Adult Cancer Clinic (21n) Mrs. Annie Hurst and Lester Granger of the Urban League are shown the new X-Ray machine by Dr. S. L. Friedman and Dr. John Mosley at the opening of the "Well Adult" Clinic for the prevention and detection of cancer at Sydenham Hospital.

Va. Doctor Granted $3,600 to Study Cancer

Afro-American Baltimore, Md.

CHARLOTTESVILLE, Va. — (ANP)—Winner of a $3,600 grant made by the Virginia Cancer foundation for the study of cancer is Dr. Julian I. Gilliam of Roanoke; according to Dr. James R. Cash, university of Virginia pathologist and chairman of the foundation's fellowship committee. Sat. 2-22-47

Dr. Gilliam will undertake a year of post-graduate study at New York University, where he will specialize in radiation therapy under Dr. Ira Kaplan of Bellevue hospital. Upon completion of the study, Dr. Gilliam will return to Virginia to practice. Sat. 2-22-47

News Birmingham, Ala.

DR. WARNER WRIGHT, Negro surgeon of Los Angeles, Calif., has accepted appointment to the board of directors of the Cancer Prevention Society, sponsors of the $2,000,000 Los Angeles Memorial hospital drive. 6-29-47-Sun. News

Cancer Society Donates $3000 For Incurables

Courier Pittsburgh, Pa. (21n)

NEW ORLEANS—The Home for Incurables, 2019 North Roman Street, founded by Miss Estelle Hubbard, has been granted $3,000 by the American Cancer Society to create a cancer wing for chronic and incurable cancer cases. An additional $1,000 has been donated by a local woman doctor.

The new wing will only be able to care for twelve patients at first, but it is hoped that additional donations will enable the home to expand its services. Under the present arrangements only patients recommended from Charity Hospital or the Department of Public Welfare will be admitted. It is hoped, however, that patients whose families can assume whole or partial responsibility can be admitted soon.

The Home for Incurables originated through Miss Hubbard's interest in the problems of the chronically ill. She was assisted by Miss Mary Railey of the Child Welfare and Community Health Association, and the American Cancer Society. Miss Hubbard has been a public health nurse for twenty-seven years and is presently employed by the City Board of Health.

Miss Hubbard invested her own time nad money into the project, and encouraged others to help. She bought a house and secured free volunteer help in modernizing and repairing it, from local tradesmen.

The board for the home is all-Negro, with Miss Hubbard as president; Mrs. Elizabeth Hames, vice president; Mrs. Anna B. Williams, financial secretary, and Mrs. Josephine Davidson, treasurer. Other prominent citizens serve on the advisory committee. The institution is non-profit. Sat. 5-24-47

Heads Cancer Education Effort

B'ham., Ala.

Twenty thousand Negro school children were being enlisted this week in an unprecedented move here to carry the American Cancer Society's attack on cancer direct into an estimated 5,000 Negro homes in Birmingham and Jefferson County. Sat. 4-5-47

The move was organized by Mrs. John T. Batten, Commander of the Society's Field Army in Jefferson County, and C. W. Hayes, supervisor of Birmingham Negro schools. It is being done in conjunction with National Negro Health Week. 21n

"Cancer killed 534 men, women and children in Jefferson County last year," Mrs. Batten declared, "and 148 of them were Negroes. That means that about one in every four cancer deaths in the county is among Negroes.

"Medical statistics indicate that there are about 600 active cancer cases among Negroes here now, and that between 150 and 200 new cases are developing each year.

Within the next two weeks, Mrs. Batten explained, approximately 100,000 pieces of literature, giving basic facts on cancer and explaining the early danger signals of the disease when it usually is in its curable stage, will be placed in the hands of children of Negro schools to be taken home and in turn placed in the hands of their parents. Sat. 4-5-47

At the same time, Supervisor Hayes has arranged for all teachers of Negro classes in city schools to include basic facts on cancer with all subjects being taught on a daily schedule.

"Insofar as we know," said Mrs Batten. "Jefferson County is the first to initiate such a mass-scale attack on cancer among the Negro papulation. And channeling basic facts to the homes through the school children is a guarantee of reaching a higher percentage of them than in any other way."

COAST PHYSICIAN NAMED TO BOARD OF CANCER GROUP

North American Newspaper Alliance

LOS ANGELES (ANP)—Dr. Warner Wright has accepted appointment to the board of directors of the Cancer Prevention Society, sponsors of the $2,000,000 Los Angeles Memorial Cancer Hospital drive. Baltimore, Md.

Weekly Review

51 SUFFERERS SHOW A HALT IN CANCERS

21n

North American Newspaper Alliance

LA GRANGE, Ga., Aug. 29—Fifty-one patients who have survived malignancies for five to ten years—living proof that cancer is not a hopeless disease—got to

the proud patients of the once were hopeless now are curable."

Cancer

Hospital's

the director of which, Dr. Callaway has been director

Callaway, told the crowd of the clinic since its establish-

barbecue on the hospital ment in 1937. He also is vice coun-

selor for the Medical Association

all rights, many of you of Georgia and chairman of the

ave been dead today if you Executive Committee for the State

taken treatment in time. Division of the American Cancer

a living proof that, with Society. One of fourteen state-aid

medicine, cancers that clinics in Georgia, the La Grange

union ever held.

They ranged from Verna Will Enoch Callaway

Duncan, a smiling 16-year-old before a bar

schoolgirl who was operated on for grounds:

serious cancer of the throat "By all r

Smedley, 81, whose multiple lesions had not taken

have been under treatment for ten You are livi

years. <

institution is approved by the American College of Surgeons and its cancer treatments are those routinely used in American hospitals. Sat. 8-30-47

The barbecue-reunion was chosen by Dr. Callaway as a dramatic way to demonstrate to his present cancer patients, and to the public, that cancer caught in its early stages need not be fatal.

Most of the forty white patients and eleven Negroes who attended had suffered advanced cases before seeking treatment. Of the 172 five-year survivors invited, 65 per cent had cancer of the skin, and 35 per cent internal cancers or skin malignancies with involvements.

Open Sydenham Cancer Clinic

3-22-47 21m

Chicago Ill.

Inexpensive Service Offered Well Adults

Defender

NEW YORK—A clinic for the prevention and detection of cancer, called the Well Adult Clinic, was opened at Sydenham Hospital on March 19, Dr. Sigmund Friedman, director of the hospital disclosed this week.

The clinic provides facilities where individuals apparently well and without symptoms can at moderate cost obtain a thorough examination as a precaution against cancer. If abnormalities requiring treatment are discovered the applicant is referred to his family physician. Sat.

The clinic will be operated under a grant from the New York City Cancer committee as a part of its program of financial aid in cancer prevention in approved New York hospitals. The Cancer Committee is assisting 12 other clinics at the present time. Dr. John S. Mosely has been named physician-in-charge of the Sydenham clinic.

CANCER EDUCATION SOUGHT IN HARLEM

Times

Appeal Is Issued to Ministers and Public Leaders to Bring Afflicted to Physicians

2 N Newyork, N.Y.

The Harlem Division of the New York City Cancer Committee, 2149 Seventh Avenue, appealed yesterday to ministers and public leaders to make people of that area conscious of the efforts to check the rise in cancer among Negro women.

Dr. John E. Moseley of Sydenham Hospital, co-chairman of the division said that tuberculosis was being defeated in Harlem but that cancer, especially among married women, was on the increase, with attendant high mortality since the majority of Negro cases were "advanced" when treatment was sought. Sat. 11-22-47

He said that "despite improved facilities now available in Sydenham, not more than 4 per cent of all persons seeking treatment are Negroes, the remainder being white persons living in areas where facilities for treatment are either less advanced or overtaxed."

Although the cost of diagnosis has been within the means of the average citizen, Dr. Moseley said that "only one or two Negroes are found on hand at any one time that the services are made available." He attributed the community lag in cancer treatment to the lack of educational propaganda.

The meeting was called by Mrs. Mathieu V. Boutte, administrative director of the Harlem center, and held at Frazier's Dining Room, 2067 Seventh Avenue. Mrs. Boutte asked for the cooperation of the larger Harlem churches in bringing cancer education before the Sunday congregations. Although more than ninety meetings were held in churches last year, many of them were small, reaching as few as ten persons, she said.

Some cooperation has been shown by trade unions and social organizations, she said. More than $7,500 was contributed this year to the work through the Harlem office.

The Harlem center was helped this year by the Baptist Educational Center of New York in presenting a cancer film and lectures on treatment and care to Sunday school teachers and superintendents. Other educational programs have been conducted jointly with the Central Harlem Health Center, Mrs. Boutte said.

Nation-wide mortality records for 1930-1940 showed a 13 per cent increase for cancer deaths among Negroes, as against an increase of only 4 per cent for white persons, a statement by the center said.

Free transportation to the center will be arranged for persons in need, and appointments will be made with clinics or private physicians, it was announced.